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REPORT
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DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION AND RELATED AGENCIES APPROPRIATION BILL, 1989

JUNE 23, 1988.—Ordered to be printed

Mr. CHILES, from the Committee on Appropriations,
submitted the following

REPORT

[To accompany H.R. 4783]

The Committee on Appropriations, to which was referred the bill (H.R. 4783) making appropriations for the Departments of Labor, Health and Human Services, and Education and related agencies for the fiscal year ending September 30, 1989, and for other purposes, reports the same to the Senate with various amendments and presents herewith information relative to the changes recommended.

Amount of budget authority

Amount of House bill	$135,794,692,000
Amount of Senate bill over House bill	[1] +4,634,049,000
Total bill as reported to Senate	[1] 140,428,741,000
Amount of adjusted appropriations, 1988	129,183,999,000
Budget estimates, 1989	138,601,064,000
The bill as reported to the Senate:	
Over the adjusted appropriations for 1988	+11,244,742,000
Over the budget estimates for 1989	+1,827,677,000

[1] Includes $3,257,921,000 for budget requests and new programs not considered by the House, but addressed by the Senate Appropriations Committee. Amounts include subsequent year advances, but exclude prior-year advances.

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SUMMARY OF BUDGET ESTIMATES AND COMMITTEE RECOMMENDATIONS

For fiscal year 1989, the Committee recommends total budget authority of $140,428,741,000 for the Departments of Labor, Health and Human Services, Education and Related Agencies. Of this amount, $14,847,000,000 is for subsequent year advances. Mandatory programs amount to $101,009,241,000, or 72 percent of the total. The remaining $39,419,500,000, or 28 percent, is for discretionary appropriations, which is an increase of $439,624,000 over the President's budget request and $1,702,818,000 more than the enacted fiscal year 1988 level.

Like the House, the Committee did not consider full-year 1990 advance appropriations for several entitlement accounts, but instead maintained fiscal 1990 first quarter advances; the President's request level has been adjusted accordingly for comparability purposes.

The Committee recommendation includes $3,257,921,000 for programs deferred by the House, which is $252,859,000 above fiscal year 1988 enacted appropriations. These are primarily existing programs in the process of being reauthorized or replaced by new legislation.

ALLOCATION CEILING

Consistent with Budget Committee scorekeeping, the recommendations result in discretionary outlays of $45.04 billion, the full amount of the subcommittee's discretionary allocation pursuant to section 302(b) of the Congressional Budget Act of 1974, as printed in Senate Report 100–384. Total discretionary budget authority is $39.42 billion, or for the full allocation ceiling.

HIGHLIGHTS OF THE BILL

Job training programs.—$3,757,328,000 is included for programs authorized under the Job Training Partnership Act, as well as $47,870,000 for activities under trade adjustment legislation. Included within the $736,135,000 Job Corps recommendation is $12,000,000 for startup costs of up to six new centers.

Employment of older Americans.—$350,000,000 provides approximately 67,000 jobs for low-income individuals aged 55 and over, an increase of 2,200 average enrollments.

State Employment Security agencies.—$2,510,723,000 maintains current services for unemployment insurance operations, and restores $50,000,000 over enacted levels for local employment service offices;

$19,500,000 is also included to continue the Targeted Jobs Tax Credit program, for which no funds were requested by the administration.

Safety and health.—$246,851,000 is for the Occupational Safety and Health Administration, with a $2,000,000 increase over the budget request for expanded enforcement activities.

Black lung.—$691,394,000 is provided for Labor Department black lung benefit payments and administrative costs, including $3,180,000 over the request to restore proposed staffing cutbacks.

AIDS.—$1,244,580,000 is recommended for research, prevention, information and education activities for acquired immune deficiency syndrome [AIDS] related programs. This is an increase of $10,000,000 over the administration request and $10,000,000 over the House. The Committee recommendation will support a wide range of AIDS-related activities including research, epidemiological studies, health care delivery systems, and public and professional education activities.

Alzheimer's.—$133,690,000 is included for all activities associated with finding the cause, cure and better treatment methods for Alzheimer's disease. This is a $43,690,333 increase over the funding level provided in fiscal year 1988, and by this increase the Committee intends a significantly higher priority be placed on Alzheimer's.

Funds for the homeless.—The Committee recommendation provides $62,730,000 for homeless programs authorized under existing statute, allocated as follows:

Job training	$12,000,000
Primary Health Care Grant Program	15,000,000
Mental health block grant	14,300,000
Mental health demonstrations	4,650,000
Substance abuse demonstrations	4,600,000
Education Department programs	12,180,000
Total	62,730,000

Maternal and child health.—$561,000,000, the fully authorized level, is included in the Committee recommendation. Community health centers are funded at $419,850,000.

Infant mortality initiative.—The Committee has expanded the infant mortality initiative funded last year by $15,000,000, to cover costs of medical malpractice insurance for 450 obstetrical providers, including obstetrician-gynecologists, family practitioners, nurse-midwives and nurse practitioners; to place and support an additional 248 obstetrical providers through the National Health Service Corps [NHSC]; and, to provide NHSC loan repayment assistance to approximately 140 obstetrical providers.

Centers for Disease Control [CDC].—$979,357,000 is recommended for the CDC. This includes $384,419,000 for AIDS-related activities. Childhood immunization is funded at $163,488,000, which is $61,900,000 more than the President's request to cover costs for a new three dose series of H influenzae b. vaccine, State operations, vaccine stockpile, and reporting requirements. Sexually transmitted diseases are funded at $70,947,000, an increase of $5,500,000 over the President's request.

National Institutes of Health [NIH].—$7,199,298,000 is recommended for NIH. This is an increase of $76,461,000 over the President's request. Within the total $613,630,000 is recommended for AIDS.

Mental health research.—$297,044,000 is provided for non-AIDS mental health research, an increase of $43,379,000 above the 1988 appropriation and $25,277,000 above the administration request. Funding increases will support higher levels of schizophrenia and Alzheimer's disease research.

Drug abuse treatment.—$180,000,000 is provided for the substance abuse treatment block grant to States, an increase of $24,083,000 above the 1988 appropriation and $14,083,000 above the administration request. This increase in funding is provided in recognition of the urgent need for expansion of State and local drug treatment facilities.

Office of the Assistant Secretary for Health [OASH].—$1,000,000 has been provided for rural health research in the National Center for Health Services Research; $7,500,000 has been provided for patient outcomes research.

Medicare contractors.—$1,551,000,000 is provided for Medicare contractor costs, which is $47,600,000 more than the President's request. Of that amount, $160,000,000 is provided to implement the Medicare Catastrophic Health Insurance Program.

Social Security Administration.—$3,820,000,000 is included for administrative costs of the Social Security Administration, restoring proposed staffing cutbacks, with bill language requiring a minimum of 66,545 full-time equivalent positions.

Family Support Administration.—$8,204,337,000 is provided for child support enforcement and AFDC entitlement payments. The community services block grant and refugee and entrant assistance are maintained at approximately current services levels, while low-income home energy assistance is reduced to the President's request level of $1,187,000,000. Pending enactment of welfare reform legislation, the Work Incentive Program is maintained at last year's enacted level.

Human development services.— $1,250,000,000 is provided for Head Start, an increase of $43,676,000; $757,700,000, an increase of $32,278,000, is provided for Administration on Aging programs, including $439,000,000 for nutrition services and $280,000,000 for supportive services and centers. Developmental disabilities programs are increased by $4,133,000 to $97,000,000. $20,000,000 is included for comprehensive child development centers, authorized by Public Law 100–297.

Compensatory education.—The Committee bill includes $4,589,800,000 for compensatory education for the disadvantaged, an increase of $261,873,000 above the fiscal year 1988 comparable level. Within this total, the bill provides $175,000,000 for concentration grants to school districts with high concentrations of low-income children. The bill also provides $4,000,000 to continue the technical assistance activities for school districts in rural areas and $4,800,000 for program improvement grants to assist States in enhancing the effectiveness of local programs.

Impact aid.—The Committee has provided $739,000,000 for impact aid to reimburse school districts for costs associated with the presence of Federal activities. This amount is $147,000,000 more than the President's request, and $30,560,000 more than the fiscal year 1988 comparable level. Funding increases are provided for students living on Federal property and school construction on Indian lands. The Committee has deferred funding for disaster assistance as carryover funds are expected to be sufficient to meet fiscal year 1989 costs.

Drug-free schools and communities.—The bill provides $250,000,000 for the recently reauthorized drug abuse education programs. This amount is the authorized ceiling for this activity and $20,224,000 more than the fiscal year 1988 level.

Science and math education.—The bill includes $139,000,000 for science and math education, an increase of $19,325,000 above the fiscal year 1988 comparable level. Funds will be used to enhance State and local efforts at improving teaching skills and student performance in these critical disciplines. Recent reports continue to highlight deficiencies among American students in these areas, especially when compared to student performance in other industrialized nations.

Magnet Schools.—The bill includes $115,000,000 for magnet schools, the same as the President's request and $43,195,000 more than the fiscal year 1988 comparable level. Funds will assist school districts in meeting desegregation requirements through the development of schools that offer special curricula designed to attract substantial numbers of students from different social, economic, ethnic, and racial backgrounds.

Education for the handicapped.—$2,008,623,000 is provided for the education for the handicapped programs, which is $139,604,000 above the 1988 appropriation and $91,741,000 above the administration request. In particular, the basic State grant is funded at $1,508,200,000 and the Preschool Grant Program is funded at $250,000,000.

Vocational Education.—The bill includes $916,950,000 for vocational education, $35,855,000 more than the fiscal year 1988 comparable level and the President's request. The Committee rejects the administration proposal to incorporate funding for consumer and homemaking education and community-based organizations into the larger basic grants program.

Adult literacy activities.—The bill includes a total of $159,180,000 for adult literacy activities, an increase of $25,144,000 above the fiscal year 1988 comparable level. The majority of funds will be distributed as basic grants to the States for adult education activities. Funds will also support literacy training for the homeless, literacy research and business partnerships for literacy training in the workplace.

Student financial assistance.—The Committee has provided $5,837,095,000 for student financial assistance, $262,502,000 less than the administration request. The Pell Grant Program is funded at $4,568,000, the amount necessary to increase the maximum Pell grant to $2,300, or by $100.

Libraries.—$135,089,000 is provided for library programs to restore the $59,089,000 reduction proposed by the administration. The appropriation is provided according to current account structure, rather than according to the administration's proposed legislation, which has not been enacted.

Related agencies.—For related agencies, Federal funds of $1,050,512,000 are recommended. This is an increase of $95,057,000 over the President's request.

The bill includes $171,897,000 for the ACTION agency, $8,812,000 more than the fiscal year 1988 comparable level and $5,906,000 more than the President's request. Within this total, increased funds are provided for the VISTA program, the Older American Volunteers programs and the ACTION Drug Alliance.

The bill includes $302,500,000 for fiscal year 1991 for the Corporation for Public Broadcasting. Within this amount, $245,000,000 shall be available for programming support and distribution to the nation's public radio and television stations, $31,000,000 more than the amount made available for fiscal year 1990. The remaining $57,500,000 shall be for the first year of contributions toward the replacement of the satellite interconnection system currently linking the Nation's public broadcasting network.

The Committee has funded $800,000 for the National Commission on Children and $1,246,000 for the U.S. Bipartisan Commission on Comprehensive Health Care.

TITLE I—DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

PROGRAM ADMINISTRATION

1988 comparable appropriation	$70,872,000
1989 appropriation request	72,289,000
House allowance	72,289,000
Committee recommendation	71,638,000

The Committee recommends an appropriation from the general fund of the Treasury of $71,638,000 for program administration, which is $651,000 below the amount of the administration request. The recommendation is $766,000 more than the fiscal year 1988 comparable appropriation of $70,872,000.

The Committee also recommends a trust fund limitation for fiscal year 1989 of $50,406,000, $3,799,000 more than the administration request and the House allowance, and $6,026,000 more than the 1988 comparable limitation of $44,380,000.

The recommendation includes 1,797 full-time equivalent [FTE] staff, 42 above the administration request and the House allowance, which is a net increase of 102 FTE over the comparable fiscal year 1988 level.

Of the total amount available, the general revenue portion of the appropriation request provides for the Federal staff costs of the Employment and Training Administration for the direction and operation of the employment and training programs authorized under the Job Training Partnership Act; the Older Americans Act of 1965, as amended; the Trade Act of 1974, as amended; and the National Apprenticeship Act of 1937. The Unemployment Trust Fund provides for Federal staff costs related to the Federal administration of employment security functions under title III of the Social Security Act of 1935, as amended and the Immigration and Nationality Act as amended by the Immigration Reform and Control Act.

The Committee has included $3,000,000 in trust funds over the budget request for employment security activities. This increase is intended to strengthen the role of the United States Employment Service to make reforms and improvements needed to meet labor market needs of the year 2000 (4 FTE), as well as to more effectively implement immigration reform legislation (33 FTE for required IRCA duties and 3 FTE for national office immigration activities). It is also intended to accelerate implementation of administrative financing changes within the Unemployment Insurance Service to further simplify the process, resulting in greater long-range savings. In addition, the Committee expects increased funding will permit greater emphasis on self-employment demonstration projects authorized by the Omnibus Reconciliation Act of 1987. The Committee has also included an increase of two FTE and $148,000 above the request to restore the "Apprenticeship services" activity to the 1988 comparable level. A shift of $799,000 from Federal to trust funds has also been recommended within the regional operations activity.

The administration request and Committee allowance includes built-in increases of $4,013,000 and 33 FTE for pay and health insurance costs, annualization of positions partially funded in 1988, the Federal employees' retirement system, increased change of station moves, and nonpersonal service cost increases including: travel, printing, communications, transportation of things, supplies, and support services.

Built-in decreases total $1,708,000, and reflect reductions in equipment, ADP costs, payments to the Federal employees' compensation fund, and lower costs due to two fewer days of pay in fiscal year 1989 than in fiscal year 1988.

Program changes are solely for increases in alien certification activities and for their support, as authorized under the Immigration Reform and Control Act. These program increases total $1,339,000 and 27 FTE.

The Committee is aware of negotiations presently being conducted between the Department of Labor and the city of Flint, MI, for disallowances in the amount of $421,470 in expenses relating to the implementation of the Comprehensive Education and Training Act of 1973, from October 1, 1975 to September 30, 1979, and from October 1, 1979 to September 30, 1981. The Committee would encourage the Department to consider, in lieu of payment, a reduction in future allocations under the Job Training Partnership Act equal to the negotiated settlement.

TRAINING AND EMPLOYMENT SERVICES

1988 comparable appropriation	$3,805,133,000
1989 appropriation request	3,430,824,000
House allowance	3,836,045,000
Committee recommendation	3,817,186,000

The Committee recommends an appropriation of $3,817,186,000 for training and employment services. This is $386,362,000 more than the administration request, $18,859,000 less than the House allowance, and $12,053,000 more than the 1988 appropriation.

This account is comprised of programs designed to enhance the employment and earnings of economically disadvantaged and dislocated workers, operated through a decentralized system of skill training and related services as authorized by the Job Training Partnership Act. This appropriation is forward-funded on a July to June cycle. Funds provided for fiscal year 1989 will support the program from July 1, 1989, through June 30, 1990.

Block grant.—The Block Grant Program gives Governors primary responsibility for an array of job training and employment services in their States. The private sector has an important role in oversight, planning, and decisionmaking, as well as operation of programs at the local level. As required by law, at least 70 percent of the funds must be used for skill training. The $1,821,486,000 recommendation is $12,000,000 over the budget request, the House allowance, and the 1988 level. This will provide approximately 377,800 average enrollments during program year 1989, about the same level supported in 1988. The increase over 1988 is for job training assistance for the homeless, in lieu of funds previously earmarked under the expiring Stewart B. McKinney Homeless Assistance Act.

Summer youth employment and training.—The Summer Youth Employment and Training Program provides jobs for economically disadvantaged youth during the summer months. The Committee recommendation is $718,050,000 for this program, the same as the budget request, 1988 level, and the House allowance. This will provide 704,200 opportunities during the summer of calendar 1990, approximately the same level as for calendar 1989.

Dislocated workers.—The Dislocated Worker Assistance Program offers job retraining and specialized support services to individuals who have been terminated, received layoff notices, or are receiving or have exhausted unemployment compensation, and are unlikely to return to their previous occupation or industry. Seventy-five percent of the Federal funds are distributed to the States on a formula basis while the Secretary of Labor has discretionary authority to award the remaining funds to States experiencing particularly severe unemployment due to mass layoffs, natural disasters, or plant closings. The Committee provides $287,220,000 for this program, the same level as 1988 and the House allowance. No funds were requested since replacement legislation, which has not been enacted, was proposed. The allowance provides 127,600 average enrollments, an increase of 15,400 over 1988.

Native Americans.—These programs are designed to improve the economic well-being of disadvantaged native Americans (Indians, Eskimos, Aleuts, and native Hawaiians) through vocational training, work experience, and other services aimed at getting participants into permanent unsubsidized jobs. The Committee recommends $59,713,000 for these purposes, which is 3.3 percent of the block grant amount as required by statute. This is the same as the budget request, 1988 level, and the House allowance.

Migrant and seasonal farmworkers.—Programs for migrant and seasonal farmworkers are aimed at alleviating chronic unemployment and underemployment being experienced by farmworker families. Training and employability development services prepare farmworkers for stable, year-round employment, both in and outside the agricultural industry. Supportive services such as health care and day care are also provided. The Committee recommends $68,172,000 for these purposes, $2,600,000 more than the 1988 level. The House allowance is $70,572,000, compared to the $57,904,000 budget request.

The increased funding is intended to serve the expanded number of eligible farmworkers resulting from immigration reform legislation. The Committee notes that the Department considered the newly eligible population of legalized farmworkers in allocating fiscal year 1988 funds. The Committee expects that the Department will continue to account for additional increases in that population when making its allocations for fiscal year 1989.

In order to improve housing for migrant and seasonal farmworkers, the Committee expects the Department of Labor to continue the farmworker housing program. For program year 1989, the Committee directs that funding for farmworker housing be increased by $200,000 above the program year 1988 level.

Job Corps.—The Job Corps provides severely disadvantaged youth, aged 16 to 21, with basic education, vocational training, job placement, and medical support and other services in a primarily residential setting. The Committee recommendation provides $736,135,000, $20,000,000 more than the 1988 level, an increase of $25,504,000 above the budget request, and a decrease of $27,496,000 below the House allowance. The $25,504,000 increase above the budget request includes a bill language earmark of $12,000,000 to begin the acquisition and construction of six new centers, $9,300,000 for necessary additional inflation adjustments, and $4,204,000 for a disapproved decrease related to Job Corps II.

Bill language included by the Committee extends the moratorium on contracting of civilian conservation centers through program year 1989.

However, the prohibition against closing Job Corps centers that was contained in earlier legislation is being eliminated. This is being done to allow for situations where the closing of a center is unavoidable such as situations where leased facilities become unavailable for continued utilization by the Department of Labor. However, it is not the Committee's intent that the Department of Labor close any Job Corps centers for reasons of poor performance or for marginal budgetary considerations. It is the Committee's position that poor performance at a Job Corps center can be remedied better through management action than closing the center. It is also the Committee's position that marginal Job Corps budgetary pressures should be addressed through cutbacks in discretionary expenditures before consideration is given to center closings.

In locating new Job Corps centers, the Department is directed to give priority consideration to those States which currently do not have centers. In addition, the Committee urges that in order to best utilize limited resources, preference be given in cases where existing Government facilities can be used at a nominal cost to Job Corps. Further, preference should be given to States which have demonstrated a commitment to linking a center with other Federal, State, and local employment, training, and education programs. Consideration should also be given to States which have shown a commitment to utilizing the Job Corps program in conjunction with other training programs to meet the needs of individuals with other barriers to employment, such as single parents.

The Committee intends that from the funds appropriated for the expansion of the Job Corps programs, that the Department also give priority consideration to enhancing Job Corps services for persons with disabilities.

Recognizing that achieving its statutory goal for 50 percent female participation will require innovative approaches, including child care services, Job Corps should consider expanding the option of child care to centers beyond the two highly successful model sites in Atlanta, GA, and San Jose, CA. In furtherance of meeting this goal and in an effort to better serve the at-risk youth population of parenting teens, the Department is urged to consider extending child care demonstration projects to additional Job Corps facilities in fiscal year 1989. These sites will include two pilots already planned as well as additional facilities.

The Committee continues to be concerned about the expenditure of Job Corps funds to pay legal expenses of Job Corps participants who are charged with criminal acts and extends language in the bill that prohibits the use of Job Corps funds to pay the expenses of legal counsel or representation in any criminal case or proceeding for a Job Corps participant, unless the Secretary certifies that a public defender is not available.

Veterans employment.—The Committee provides $9,633,000 for special veterans employment programs. This is $333,000 less than the 1988 level and the House allowance, and the same as the budget request. These funds provide special employment and training programs designed to meet the unique needs of disabled, Vietnam-era, and recently separated veterans.

National activities.—These programs provide employment and training assistance to special target populations, such as offenders, handicapped individuals, and older workers. These funds are also used to support research and development, evaluation, labor market information, and training and technical assistance. Contracts with groups such as labor unions and community-based organizations are awarded at the discretion of the Secretary.

The Committee provides $68,907,000 for these national programs, $3,500,000 above the budget request, $1,500,000 above the House allowance, and $12,640,000 below the 1988 level.

The recommendation includes: $29,620,000 for pilots and demonstrations; $18,592,000 for research, development, and evaluation; $5,434,000 for labor market information; $5,761,000 for training and technical assistance; $5,000,000 for the National Occupational Information Coordinating Committee; $2,000,000 for the National Commission for Employment Policy; and $2,500,000 for service delivery areas with significant American Samoan populations. No funding is included for the four Rural Concentrated Employment Programs which previously received set-aside funding. Formula allocations available to these areas under the block grant and summer programs are sufficient.

The Committee has included $2.5 million to continue last year's American Samoan employment and training initiative in the States of

Hawaii and California, following up on the Department's 1984 report to the Congress. These Native American peoples have long experienced disproportionate unemployment rates, due primarily to language and cultural barriers. The Committee has been impressed by the State of Hawaii's efforts to date and its willingness to develop similar innovative programs targeted toward immigrants from the American Pacific, Southeast Asia, and the Philippines. The pressing needs of these populations must be considered a joint Federal-State responsibility. The Committee has provided bill language to continue the program. The State of Hawaii is expected to work closely with the national Samoan organizations, where appropriate, to ensure that necessary services are also provided on the mainland. The Committee is aware of the concern among the American Samoan community that there remains a significant underestimate of the numbers of Samoans living in the United States. Accordingly, consideration should be given to using a portion of these funds to establish an accurate data-base for the Committee in order that future program allocations might be made on valid information.

The Committee is concerned that insufficient opportunities exist for persons to receive necessary substantial training to become truck drivers, and encourages the Secretary to promote opportunities for such training.

Trade adjustment assistance.—This program provides grants to State employment security agencies for retraining, job search, and relocation assistance to individuals adversely affected by our Nation's trade policies, as authorized by the Trade Act. The Committee recommendation includes $47,870,000 for these purposes, the same as the 1988 level and $2,130,000 below the House allowance. The budget request included no funds for this effort.

Homeless job training.—The Committee has not provided funding for special programs of assistance to the homeless under the expiring Stewart B. McKinney Homeless Assistance Act. No funds were requested by the Administration. Instead, the Committee has added $12,000,000 to the job training block grant program, with the expectation that the increase over the fiscal 1988 enacted level will be utilized for assistance to the homeless.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

1988 comparable appropriation	$331,260,000
1989 appropriation request	336,000,000
House allowance	346,000,000
Committee recommendation	350,000,000

The Committee recommends an appropriation of $350,000,000 for this program, an increase of $14,000,000 above the administration's request, $4,000,000 above the House allowance, and $18,740,000 above the 1988 comparable appropriation.

This program provides part-time job opportunities in community service activities for unemployed, low-income individuals, aged 55 and older, as authorized by title V of the Older Americans Act. Program participants generally work 20 to 25 hours per week in a wide variety of activities including day care, schools, hospitals, senior citizen centers, nutrition programs, and facilities for the handicapped.

The Committee allowance would provide approximately 67,000 average enrollments at a per enrollee cost of $5,225 for the period July 1, 1989 to June 30, 1990. This is nearly 2,200 above the projected average enrollment (approximately 64,800) for fiscal year 1988 (July 1, 1988 to June 30, 1989). Moreover, the Committee recommendation would permit the funding of a national Pacific/Asian organization and a national Indian organization, as provided in the 1987 Older Americans Act Amendments (Public Law 100–175). The Committee has increased the average per enrollee cost from $5,111 to $5,225 to accommodate minimum wage hikes which have already become effective or will become effective in at least 11 States. The adjustment in the per enrollee cost is also necessary because this unit of measurement has not been updated since 1981. However, operating costs have risen—such as worker's compensation costs, Social Security payroll taxes for administrative personnel, rent, telephone, and others—during this period, and in some cases quite dramatically.

The Committee has retained the existing bill language percentage distribution of resources between States and national contractors, of 22 percent and 78 percent, respectively.

The Committee reaffirms its strong support for this effective program. It is the intent of the Committee that the current sponsors continue to build upon their past accomplishments, and it is further expected that the Department of Labor will maintain substantially the existing status and method of operation so as to assure minimal disruption of this successful program.

The Secretary of Labor should encourage the sponsors to continue their efforts to transfer program participants into private sector jobs. The Committee encourages service delivery areas under the Job Training Partnership Act to make greater use of national sponsors under the Community Service Employment Program for Older Americans as a means for enrolling more economically disadvantaged persons aged 55 or older in training programs. Service delivery areas should continue to utilize State and area agencies on aging and increase their involvement in job training programs.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

1988 comparable appropriation	$141,000,000
1989 appropriation request	134,000,000
House allowance	134,000,000
Committee recommendation	134,000,000

The Committee recommends an appropriation of $134,000,000 for this account, the amount of the administration request and the House allowance, and $7,000,000 less than the fiscal year 1988 comparable appropriation.

This account currently provides for the payment of unemployment compensation benefits and allowances to workers certified under the Trade Act, and for benefits paid to individuals deprived of employment as a result of the Redwood National Park Expansion Act.

This recommendation provides $132,000,000 for trade benefits for fiscal year 1989, a built-in decrease of $6,000,000 from fiscal year 1988, and $2,000,000 for benefits under the Redwood National Park Expansion Act for fiscal year 1989, a built-in decrease of $1,000,000 from 1988.

The administration had requested creation of a "Worker readjustment" appropriation as a successor to the "Federal unemployment benefits and allowances [FUBA]" account. This newly titled account anticipated passage of pending worker readjustment legislation included in the trade bill (H.R. 3), vetoed by the President.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

1988 comparable appropriation	$22,403,000
1989 appropriation request	21,500,000
House allowance	22,833,000
Committee recommendation	22,833,000

The Committee recommends a Federal fund appropriation of $22,833,000 for State unemployment insurance and Employment Service operations, an increase of $1,333,000 over the administration request and the same as the House allowance. The balance of the funding for this account is derived from the "Employment security administration" account of the unemployment trust fund. The Committee recommends that a trust fund limitation of $2,484,890,000 be provided, which is $112,696,000 over the administration request and $66,485,000 more than the $2,418,405,000 provided in fiscal year 1988.

This appropriation provides funding to State employment security agencies for the administration of Federal and State compensation laws and local public employment offices. In addition, there is a contingency fund as a part of this account to meet increases in the costs of administration of unemployment insurance programs.

For the employment service, the Committee recommends $829,623,000, comprised of $22,833,000 in Federal funds and $806,790,000 from the unemployment trust fund. This is $114,029,000 over the administration request, $12,176,000 over the House allowance, and $49,539,000 more than provided for fiscal year 1988.

Of the amount provided for the employment service, $773,029,000, $21,733,000 in Federal funds and $751,296,000 in trust funds, is for State grants. These grants are distributed to the States by a demographically based formula enacted as part of the 1982 amendments to the Wagner-Peyser Act. They provide funding for State public employment services, such as job counseling, testing, and referral to employers.

The increase of $50,000,000 in State allotments over the 1988 level is necessary to restore cutbacks that have threatened to result in further closings of local employment service offices. It is the intent of the Committee that services be improved, particularly in rural areas where applicants should not be forced to drive long distances to receive vital employment services.

The balance of the funds provided for the employment service, $56,594,000, of which $1,100,000 is Federal funds and $55,494,000 is trust funds, is for national activities. National activities include labor certification of foreign workers, housing inspections for agricultural workers, development of tests for job selection, and maintenance of an interstate labor clearance system. The allowance includes $19,500,000 to maintain the Targeted Jobs Tax Credit Program, for the first 7 months of fiscal 1989 compared to $7,324,000 recommended by the House for the first 3 months of fiscal 1989. Although this program expires December 31, 1988, processing of certifications from hiring actions before that date are expected to continue for several months into 1989.

The Committee recommendation for the employment service also provides for built-in increases, for inflation, of $15,602,000. Program changes include both increases and decreases. Program increases total $8,194,000 for immigration activities, interstate labor clearance, test development and occupational analysis field centers.

For the unemployment insurance service, the Committee recommends $1,678,100,000 in trust funds, the amount of the administration request and the House allowance, and $17,376,000 over the amount provided for 1988.

Of the amount provided for the unemployment insurance service, $1,255,883,000 is for State operations. These funds are given as administrative grants to the States, to pay unemployment compensation to workers and collect State unemployment taxes from employers. Included in this amount is $19,148,000 for State unemployment insurance automation activities, as requested. In addition, $254,587,000 is provided to maintain the integrity and stability of the unemployment insurance program. These funds are to be used for a quality control system to assess and reduce errors in the payment of benefits and collection of State taxes. The Committee has also provided $10,151,000 for national unemployment insurance activities for interstate operations such as data and claims exchange. The balance of the amount for the unemployment insurance service, $157,479,000, is provided for the contingency fund. This fund covers the cost of certain changes which may occur in State unemployment law, in unemployment claims and in State salary rates. In addition, this fund provides for the amortization of four State independent employment service retirement plans which existed prior to 1980.

The Committee recommendation for the unemployment insurance service provides for built-in increases of $104,582,000 for State salary and benefit increases, workload increases, and nonpersonal services costs. Unemployment insurance built-in decreases of $57,339,000 are the result of changed economic estimates, savings due to automation, and elimination of funding for changes of State wage recording systems, which was required under the law by 1988. In addition the unemployment insurance funding reflects a shift of workload from the base to contingency funding, reflecting a net built-in decrease of $32,326,000. Program changes for unemployment insurance consist of $3,945,000 for State Integrity increases and a decrease of $1,486,000 in the amount needed for amortization of employment service retirement systems funded through the unemployment insurance contingency fund.

In its budget request for the Unemployment insurance and employment service operations, the Department urges the States to develop program strategies and innovations to ensure maximum efficiency in the utilization of services. The availability of computerized data systems at the State level would ensure the maximum efficiency in the delivery of employment services that the Department is striving for. The Committee is aware that approximately five States including the State of Hawaii do not presently possess this capacity. Accordingly, the Committee urges the Department to provide additional funds to those States in order that they might become computerized in a timely fashion.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

1988 comparable appropriation	$30,000,000
1989 appropriation request	124,000,000
House allowance	124,000,000
Committee recommendation	124,000,000

The Committee recommends an appropriation of $124,000,000 for advances to the unemployment trust fund and other funds. This is the amount of the administration request and the House allowance, and $94,000,000 more than the comparable amount for 1988.

This appropriation provides Federal funds necessary to make required payments for unemployment compensation, black lung, and other benefits, whenever the fund balances in those accounts prove insufficient to make payments which are mandatory under the law.

Of the $124,000,000 estimated for 1989, the entire amount will be for advances to the black lung disability trust fund, so that mandatory black lung disability payments may be made. The requested amount is required to provide an adequate cash flow for the black lung disability trust fund throughout fiscal year 1989 and to cover any shortfall in taxes for fiscal year 1988 not provided for by the black lung disability trust fund or the advances to the unemployment trust fund and other funds.

In fiscal year 1989, should the need for advances arise in any of the other accounts eligible to receive them, due to unanticipated changes in the economic situation, advances will be made to the extent funds are available.

LABOR-MANAGEMENT SERVICES

1988 comparable appropriation	$76,776,000
1989 appropriation request	73,059,000
House allowance	73,059,000
Committee recommendation	73,059,000

The Committee recommends an appropriation of $73,059,000 and 1,018 full-time equivalent [FTE] positions for Labor-Management Services. This recommended appropriation is the same as the House allowance and the budget request. The Committee's recommendation is $3,717,000 less than the fiscal year 1988 appropriation of $76,776,000.

The Department of Labor will use these funds and staff resources to carry out its responsibilities under the Employee Retirement Income Security Act, the Federal Employees' Retirement System Act, and the Labor-Management Reporting and Disclosure Act. It will also use funds to insure that fair and equitable protective arrangements are afforded employees affected by transportation and other Federal assistance programs, and to encourage voluntary, cooperative labor-management programs.

The Labor-Management Services appropriation is composed of the following organizations: Bureau of Labor-Management Relations and Cooperative Programs, Office of Labor-Management Standards and Pension and Welfare Benefits Administration. The Bureau of Labor-Management Relations and Cooperative Programs supports high priority labor relations functions designed to encourage labor- management cooperation for continued enhancement of productivity and improved competitive posture of the United States. The Office of Labor-Management Standards combats serious violations of the Labor-Management Reporting and Disclosure Act and related acts covering public employee unions which interfere with democratic procedures within labor organizations. The Pension and Welfare Benefits Administration is responsible for the enforcement of the Employee Retirement and Income Security Act in both civil and criminal areas, as well as, enforcement of sections 8477 and 8478 of the Federal Employees' Retirement System Act.

This level includes a net program decrease totaling $5,716,000 and a net mandatory increase of $1,999,000. The program decrease is due to the anticipated completion of an automated Employee Retirement Income Security Act data system. Mandatory increases are included for: within-grade increases, annualization of the pay increase effective January 1988, one-half of the pay increase effective January 1989, and increased costs of personnel benefits, travel, space rental, working capital fund, contracts, printing, supplies and equipment. Included in the total is $5,000,000 for operating costs of the Employee Retirement Income Security Act automated data base, to be available until September 30, 1990, and a net reduction of four FTE achieved through efficiencies gained from the use of advanced technology and other productivity improvements.

PENSION BENEFIT GUARANTY CORPORATION

This is a wholly owned Government corporation established by the Employee Retirement Income Security Act of 1974. The law places it within the Department of Labor and makes the Secretary of Labor the chairman of its Board of Directors. The Corporation is self-financing and receives its income primarily from insurance premiums collected from covered pension plans, collections of employer liabilities imposed by the act, and investment earnings. It is also authorized to borrow up to $100,000,000 from the Treasury. The primary purpose of the Corporation is to guarantee the payment of pension plan benefits to participants in the event that covered plans fail or go out of existence.

The Committee's recommendation is the same as agreed to by the House, authorizing expenditures within limits of funds and borrowing authority available to the Corporation. The Corporation's budget program for fiscal year 1989 includes benefit payments of $420,362,000, multiemployer financial assistance of $1,800,000, the requested program administrative cost limitation of $41,232,000, and approval of non-administrative expenses. The budget also includes 546 full-time equivalent [FTE] staff.

The Committee has approved requested program increases of 40 FTE and $1,426,000 for benefits administration, 8 FTE and $288,000 for added legal staff, 2 FTE and $95,000 for expanded research capability, and 2 FTE and $61,000 for the premium auditing function. A total of $1,366,000 in additional contract funds is included for items such as actuarial assistance, the redesign of the premium processing system and ADP improvements to keep pace with the growing workload.

In addition, the Committee approves the Corporation's proposal to pay expenses from the revolving fund, without limitation, that were previously paid from the trust fund. The expenses include contracts for trust fund investment management fees, trust fund-related legal and financial fees, and benefits administration. This change will not result in increased outlays since the revolving fund will be reimbursed by the trust fund for these expenses. The change is proposed to assure that the Corporation has timely access to necessary obligating authority for these substantial expenses that arise from unpredictable pension plan termination activity. The change will also result in a more consistent treatment of the Pension Benefit Guaranty Corporation's budgetary resources by subjecting them to more thorough review.

Under current law, a business may terminate an overfunded defined benefit pension plan in order to recover the plan's excess assets for its own use. The bill includes language which would establish a moratorium until October 1, 1989, on such asset reversions by employers. Employers may still terminate sufficiently funded pension plans during this period but may not recapture the plan's assets that are in excess of liabilities to plan participants and beneficiaries. Excess assets will be held in escrow until the end of the moratorium period while Congress considers a permanent legislative solution.

EMPLOYMENT STANDARDS ADMINISTRATION

1988 comparable appropriation	$207,709,000
1989 appropriation request	214,489,000
House allowance	214,489,000
Committee recommendation	214,489,000

The Committee recommends an appropriation of $214,489,000 for the Employment Standards Administration, the same as the administration request. The recommendation is $6,780,000 more than the fiscal year 1988 comparable estimate of $207,709,000 and the same as the House allowance.

The recommendation also includes authority to expend $526,000, the amount of the budget request and House allowance, from the special fund established by the Longshore and Harbor Workers' Compensation Act.

The Committee has approved 4,103 full-time equivalent [FTE] positions for this agency, a net increase of 43 from the comparable number in 1988. This number includes positions that are financed by a transfer of $30,210,000 from the Black Lung Disability Trust Fund.

The Employment Standards Administration administers employment standards programs under several laws including the Fair Labor Standards Act, and Immigration Reform and Control Act of 1986, the Migrant and Seasonal Agricultural Workers' Protection Act, the Davis-Bacon Act, the Federal Employees' Compensation Act, the Longshore and Harbor Workers' Compensation Act, and the Federal Rehabilitation Mine Safety and Health Act—black lung; and assures nondiscrimination and affirmative action for minorities, women, veterans, and handicapped workers by administering Executive Order 11246, as amended, affirmative action provisions of the Rehabilitation Act of 1973, as amended, and the Vietnam Era Veterans' Readjustment Assistance Act of 1974.

The recommendation reflects program increases totaling $5,679,000. The Wage and Hour Division is provided a program increase of $1,148,000 and 20 FTE for increased homeworker enforcement, and $1,248,000 and 23 FTE positions to meet responsibilities under the Immigration Reform and Control Act. In addition, the Wage and Hour Division would receive $1,709,000 to modernize office equipment and systems, $474,000 is provided to the Office of Federal Contract Compliance Programs for travel related to staff training, $350,000 covers the recompetition of the black lung services contract and $750,000 is to reimburse the United Mine Workers' of America health retirement funds for processing black lung medical bills.

The recommendation also includes built-in increases over the current fiscal year to cover annualization of 1988 pay costs and one-half the increased costs resulting from the 1989 pay raise, within-grade promotions, increased costs for utilities, space rental, printing, contract services, ADP, the working capital fund, the Federal Employees' Compensation Fund and the Federal Employees' Retirement System.

Also included are built-in decreases of $8,552,000, including $240,000 related to start-up costs associated with the Immigration Reform and Control Act, $1,142,000 for 2 fewer days of pay, $6,882,000 for one-time costs of ADP equipment and supply purchases for the Federal employees' compensation data system enhancement project in fiscal 1988, and $288,000 due to decreased costs of other administrative support items.

SPECIAL BENEFITS

1988 comparable appropriation	$174,000,000
1989 appropriation request	292,000,000
House allowance	292,000,000
Committee recommendation	255,000,000

The Committee recommends $255,000,000 for special benefits. The recommendation is $81,000,000 more than the fiscal year 1988 comparable estimate of $174,000,000 and $37,000,000 below budget request and the House allowance.

The account provides funding necessary to meet required payments for compensation, medical costs, vocational rehabilitation, and other benefits to those individuals eligible for assistance under the Federal Employees' and Longshore and Harbor Workers' Compensation Acts.

The $255,000,000 provided for this entitlement account consists of $251,000,000 for payments under the Federal Employees' Compensation Act and $4,000,000 under the Longshore and Harbor Workers' Compensation Act. The Committee has deleted $37,000,000 requested to cover compensation payments to former Post Office Department employees in fiscal 1989, although it has agreed to include $35,000,000 for the drawdown needed for the shortfall in fiscal 1988. These are mandatory payments which should be included in the fiscal 1989 Treasury-Post Office appropriations bill.

The Committee expects the Labor Department to exclude from its fiscal year 1990 budget submission to Congress amounts to cover workers compensation reimbursements for former Post Office Department employees; these costs should be included in the Postal Service submission.

The Committee notes that all Federal agencies meet their responsibilities, as required by Public Law 93–416, by reimbursing the Labor Department the appropriate amounts. Requiring all agencies to budget for workers compensation costs focuses their attention on promoting safer and healthier workplaces for their employees and helps assure that they effectively manage their claims to get people back to work as quickly as possible.

BLACK LUNG DISABILITY TRUST FUND

1988 comparable appropriation	$649,169,000
1989 appropriation request	688,214,000
House allowance	688,214,000
Committee recommendation	691,394,000

The Committee recommends an appropriation of $691,394,000 for the black lung disability trust fund. This is $3,180,000 over the administration request and the House allowance. The recommendation is $42,225,000 more than the fiscal year 1988 appropriation of $649,169,000.

The Committee recommendation for this entitlement program includes $619,465,000 for payment of benefits and $57,959,000 for salaries and expenses for various components of the Department of Labor and $13,970,000 to be drawn from fiscal 1989 budget authority to cover benefit payments in fiscal 1988.

In 1988, benefit payments are estimated to be $608,492,000 including the amount drawn from fiscal 1989 availability. Administrative expenses total $54,647,000.

The Committee has provided $3,180,000 in funding for the elimination of the black lung claims backlog ($2,137,000 for 8 administrative law judges and 16 support staff, $459,000 for the Benefits Review Board for 11 staff, and $584,000 for 10 attorneys and 3 clerical staff for the Solicitor's Office). This restores additional staffing and funding provided in fiscal year 1988 for the processing of black lung claims.

The Committee notes that progress has been made at the hearing level on the elimination of the backlogs of black lung claims, and that the backlogs will be eliminated this fiscal year. However, the Committee is strongly concerned over the continued backlogs at the Benefits Review Board, and over reports that the Board is not operating with the full nine-member panel, nor is meeting the projected number of dispositions. Therefore, the Department is directed to furnish a full report within 90 days of the enactment of this bill into law on what actions are being taken to more effectively deal with the backlogs at the Benefits Review Board.

The trust fund pays all black lung compensation/medical and survivor benefit expenses when no responsible mine operator can be assigned liability for such benefits, or when coal mine employment ceased prior to 1970, as well as all administrative costs of the Departments of Labor, including reimbursement of Health and Human Services, and Treasury incurred in administering the benefits program and operating the trust fund.

Financing for the fund comes from a coal-excise tax, reimbursement payments from mine operators for benefit payments made by the fund before the mine operator is found liable, and advances to the fund to assure availability of necessary funds when liabilities may exceed other income. The Omnibus Budget Reconciliation Act of 1987 continues the current tax structure until 2014. Advances for fiscal 1989 are estimated at $124,000,000.

The fiscal 1989 appropriation includes no funds for the payment of interest on the outstanding indebtedness of the trust fund as provided in the Consolidated Omnibus Budget Reconciliation Act of 1985.

In 1982, there were 25 black lung field offices which processed telephone and walk-in inquiries for black lung beneficiaries and claimants. The Committee again, reiterates its position, that the Department of Labor is expected to take no action to close the black lung field offices, and that these offices will remain staffed.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

1988 comparable appropriation	$235,474,000
1989 appropriation request	244,851,000
House allowance	246,517,000
Committee recommendation	246,851,000

The Committee recommends an appropriation of $246,851,000 for the Occupational Safety and Health Administration, which is $334,000 more than the House allowance and $2,000,000 more than the administration request. The recommendation is $11,377,000 more than the fiscal year 1988 comparable appropriation of $235,474,000.

The Occupational Safety and Health Administration promulgates occupational safety and health standards and enforces compliance by inspecting places of employment. The agency also provides consultation, training, and information services for employers and employees and publishes statistics concerning the incidence, severity, and cause of occupational injuries and illnesses. Fifty percent matching grants are provided by Occupational Safety and Health Administration to assist States and jurisdictions in administering and enforcing State occupational safety and health programs.

The recommendation of $246,851,000 and 2,442 full-time equivalent [FTE] positions includes a net increase for built-in items such as within-grade promotions, space rental charges, annualization of the pay increase effective January 1988, and increases in State grant costs. Planned decreases for items such as one-time costs associated with Federal coverage in California and working capital fund charges are also included.

The Committee is concerned that the steady increase in worksites under OSHA's jurisdiction over the last several years has eroded OSHA's ability to enforce adequately the Occupational Safety and Health Act of 1970. The Committee continues to believe that more aggressive OSHA field inspections are necessary to prevent accidents, such as the collapse of the L'Ambiance Plaza apartment in Bridgeport, CT, on April 28, 1987, from occurring. Therefore, the Committee has provided $1,000,000 over the request of the administration for Federal enforcement of occupational health and safety standards, to fund 12 additional full-time equivalent [FTE] positions in fiscal 1989, which will annualize to 24 FTE in fiscal 1990.

The Committee has added $1,000,000 to the budget request for State operational grants for a revised total of $42,334,000. The Committee is concerned that the proposed 2-percent increase in the budget request is not adequate to allow the States to maintain current program levels. The entire increase is to be allocated among all State-plan States as an across-the-board cost-of-living increase.

The recommendation also includes a program increase of $4,668,000 and 52 FTE to provide for additional safety and health enforcement in the State of California. The Committee has recommended continuation of bill language enacted in fiscal 1988 to prohibit Federal take over of the Cal-OSHA program (general provision section 514).

The Committee has retained all bill language in the enacted fiscal year 1988 appropriations legislation as follows: An exemption from coverage of farms employing 10 or fewer individuals, unless the farms have a temporary labor camp; an exemption for employers of 10 or fewer individuals from routine safety inspections, if they have occupational injury lost workday case rates below the national average; a prohibition against regulations which restrict work activity in any area by reason of the potential for recreational hunting, fishing, or sports shooting in that area; a prohibition against State plan monitoring visits by OSHA within 6 months of a State inspection; a prohibition against inspections on the Outer Continental Shelf intended to prevent duplication with jurisdiction of other agencies; a prohibition against assessment of penalties for first-instance, nonserious violations unless there are 10 or more such violations; and a prohibition on the use of funds for penalties against employers of 10 or less people in cases where the employers previously requested onsite consultation and were making good-faith efforts to comply.

Occupational health nurse

For the past 2 years the Committee has been assured that OSHA was in the process of hiring an occupational health nurse in order to utilize nursing expertise in its policy determinations. This has not been done although the Department has on several occasions assured the Committee that it would be done expeditiously. Although the Committee understands that good faith efforts have been made to hire an occupational health nurse, and it appears delays at the Office of Personnel and Management have been excessive, this has been a matter of considerable interest to the Committee for several years and OSHA is directed to fulfill its earlier expressed commitment without further delay.

Recordkeeping violations

For the last few years the Committee has been concerned about the accuracy of occupational injury and illness records because of their importance to OSHA's enforcement efforts. We are pleased that the Labor Department in 1986 began a joint OSHA/BLS study to develop and test procedures that could be used to review the accuracy of employers' records. In June 1988, the General Accounting Office informed this Committee that the study has been completed and BLS has concluded that the procedures are feasible, although somewhat resource intensive. In addition, the study's detailed review procedures allowed OSHA to find much more evidence of employer underreporting of injuries and illnesses than OSHA compliance officers typically find. However, there is little evidence that either BLS or OSHA is seriously considering ways in which those procedures could be implemented further.

The Committee is concerned that potentially useful procedures for finding record keeping violations not be abandoned prematurely. Although resources may be insufficient for nationwide use of these labor-intensive procedures, there may be situations in which they should be implemented. By December 1, 1988, the Labor Department should provide a report to the Committee that (1) identifies options for use of these procedures, with accompanying cost estimates, and (2) indicates which, if any, options will be implemented, with implementation timeframes. The Committee expects GAO to provide more detailed information on the issue of accuracy in employer records and report to the Committee later this year.

MINE SAFETY AND HEALTH ADMINISTRATION

1988 comparable appropriation	$160,193,000
1989 appropriation request	164,597,000
House allowance	164,597,000
Committee recommendation	164,597,000

The Committee recommends an appropriation of $164,597,000 for the Mine Safety and Health Administration. This is the same as the budget request and the House allowance. The recommendation is $4,404,000 more than the fiscal year 1988 comparable appropriation of $160,193,000.

The Mine Safety and Health Administration is responsible for enforcing the Federal Mine Safety and Health Act of 1977 throughout the mining industry. It insures the safety and health of the Nation's coal miners by conducting inspections and special investigations of mine operations, promulgating mandatory safety and health standards, cooperating with States in developing effective State programs and improving training in conjunction with States and the mining industry.

The Committee's recommendation of $164,597,000 and 2,791 full-time equivalent [FTE] positions includes increases for built-in items such as within-grade promotions, employee performance bonuses, annualization of the fiscal year 1988 pay raise and one-half of the increased costs of the pay raise effective in January 1989, higher costs for both the Federal Employees' Retirement and Compensation systems, and costs of supplies, contract services, printing, rent, and travel.

The Committee has included language carried in last year's appropriations bill prohibiting the use of funds to carry out the training provisions of the act with respect to shell dredging or with respect to any sand, gravel, surface stone, surface clay, colloidal phosphate, or surface limestone mine.

BUREAU OF LABOR STATISTICS

1988 comparable appropriation	$176,481,000
1989 appropriation request	190,397,000
House allowance	190,397,000
Committee recommendation	190,397,000

The Committee recommends an appropriation of $190,397,000 for the Bureau of Labor Statistics [BLS], which is the same as the administration request and the House allowance. It is $13,916,000 more than the fiscal year 1988 comparable appropriation of $176,481,000.

The recommendation includes a full-time equivalent [FTE] staff level of 2,175, a net increase of 53 over 1988. This staff increase is related primarily to the revision of the International Price Program and the development of a central business establishment list. This is the same amount as the administration request and the House allowance. In addition, the recommendation provides authority to expend $46,323,000 from the "Employment Security Administration" account in the unemployment trust fund. This is the same amount as the administration request and House allowance, and $4,754,000 over the comparable 1988 level.

The Bureau of Labor Statistics is the principal fact-finding agency in the Federal Government in the broad field of labor economics. The Bureau collects, processes, analyzes, and disseminates data on employment and unemployment; prices and living conditions; consumer expenditures; wages and employee benefits; industrial relations activities; productivity and technological change in U.S. industries; projections of economic growth, the labor force, and employment by industry and occupation; and occupational injuries and illnesses. The Bureau's statistical series provide some of the major indicators used in developing economic and social policy, making decisions in the business and labor community, developing legislative and other programs affecting labor, conducting research on labor market issues, and administering and evaluating on-going Federal programs.

The Committee has approved the requested program increases totaling $14,347,000. This includes $5,500,000 for development of a central business establishment list, $778,000 for the estimation of agricultural seasonal farmwork, $3,225,000 for the revision of the International Price Program, $1,379,000 for increased costs of funding the Census Bureau contract, $2,295,000 for increased State costs in connection with the Federal-State cooperative programs, and $1,170,000 for increased costs of the working capital fund.

The recommendation also includes increases of $5,798,000 over 1988 for net built-in items such as within-grade promotions, annualization of pay increase costs, and space rental charges. Planned decreases of $1,475,000 in the Consumer Price Index revision, and the standard industrial classification system revision are also approved.

DEPARTMENTAL MANAGEMENT

SALARIES AND EXPENSES

1988 comparable appropriation	$114,929,000
1989 appropriation request	117,339,000
House allowance	117,339,000
Committee recommendation	118,839,000

The Committee recommends an appropriation of $118,839,000 for departmental management salaries and expenses, which is $1,500,000 more than the House allowance and the administration's Federal funds request. The recommendation is $3,910,000 more than the fiscal year 1988 comparable appropriation of $114,929,000.

The recommendation includes Federal funds of $118,839,000 and trust funds of $285,000 to be transferred from the "Employment Security Administration" account of the unemployment trust fund, and $27,234,000 to be derived from the black lung disability trust fund. The recommendation from all sources totals $146,358,000 which supports a total of 2,025 full-time equivalent [FTE] positions. The FTE level represents a decrease of 20 from the 1988 level.

The appropriation finances staff responsible for formulating and overseeing the implementation of departmental policy and management activities for the purpose of protecting and promoting the interest of the American worker. Other activities include international labor affairs, promoting employment of the handicapped, and the Women's Bureau.

The black lung disability trust fund amount recommended by the Committee reflects an increase of $3,180,000 over the amount in the budget request and the House allowance. This increased funding will finance an additional 48 FTE staff in the adjudication and legal services activities to ensure elimination of the black lung case backlog at the hearing and appeal levels in the Department by fiscal 1990. This restores the 48 FTE staff that were provided for in the fiscal 1988 appropriation to reduce the black lung case backlog but which were not provided for in the Department's budget request or in the House allowance.

The $3,180,000 includes $2,137,000 for 8 additional judges and 16 support staff for the Office of Administrative Law Judges to ensure elimination of the backlog of black lung cases at the administrative hearing level. The Benefits Review Board would receive $459,000 for 11 additional staff to permit it to handle additional appeals generated as a result of increased dispositions by the Office of Administrative Law Judges. The remaining $584,000 is for 13 additional staff for the Solicitor's Office to allow it to represent the Department at an increased number of review proceedings as disposition levels increase.

The recommendation reflects program increases totaling $2,656,000. An increase of $250,000 is included for the Assistant Secretary for Policy to conduct a joint study with the Equal Employment Opportunity Commission on aging, fitness, and public employment. This study, which is mandated by the Age Discrimination in Employment Amendments of 1986 (Public Law 99–592), is to be submitted to the Congress by October 31, 1990. Other increases include $453,000 for Legal Services to provide for contractor services and ADP support, $317,000 for contract writer services and payment of administrative staff for training for the adjudication activity, and $136,000 for the Directorate of Civil Rights to provide contract technical assistance and training in title VI and title VII of the Civil Rights Act of 1964. An increase of $1,000,000 is recommended in the administration and management activity to permit the Department to replace outdated equipment currently in use in its personnel management information system [PERMIS] with more modern, up-to-date automated data processing equipment. And finally, $500,000 is included to expand Women's Bureau projects with such organizations as the National Displaced Homeworkers Network.

The recommendation reflects a program decrease of $977,000 in the administration and management activity associated with a capital investment for data communications architecture that was a one-time expense provided for in fiscal 1988. The recommendation also includes a 20-FTE staff reduction to reflect planned enhanced contract services and support for programs and activities.

The recommendation also reflects net built-in increases totaling $2,823,000. This nonprogram increase amount reflects mandatory increases for such items as within-grade promotions, pay increase and Federal Employees' Retirement System costs and space rental, working capital fund and contract costs. These increases are offset by mandatory decreases for 2 fewer days of pay in fiscal year 1989 and reduced space rental and working capital fund costs.

ASSISTANT SECRETARY FOR VETERANS' EMPLOYMENT AND TRAINING

1988 comparable appropriation	$139,614,000
1989 appropriation request	142,406,000
House allowance	148,887,000
Committee recommendation	160,006,000

The Committee recommends a trust fund limitation of $160,006,000 for the Assistant Secretary for Veterans' Employment and Training. This is $17,600,000 above the administration request, $11,119,000 more than the House allowance, and $20,392,000 more than the comparable 1988 limitation. This limitation provides authority to expend funds from the "Employment Security Administration" account of the unemployment trust fund. The Committee recommendation also provides for 276 full-time equivalent [FTE] staff, the amount of the administration request and the House allowance. These 276 FTE are 3 less than the comparable fiscal year 1988 level of 279 FTE.

The Assistant Secretary for Veterans' Employment and Training exercises functional supervision over the execution of veterans' counseling, training, and placement policies through the public employment service and other employment and training programs. This includes responsibility for the Disabled Veterans' Outreach Program and Local Veterans Employment Representative Program. Other activities include promoting compliance by Federal contractors with affirmative action requirements for special veteran target groups, and handling claims from veterans, reservists, and National Guard members for restoration of jobs, seniority, and/or pension rights denied by their employers due to absences from the workplace for military service.

The recommended funding level includes $67,812,000 for the Local Veterans Employment Representative Program, an increase of $15,447,000 over the fiscal year 1988 comparable amount, and $73,848,000 for the Disabled Veterans Outreach Program, $1,448,000 more than the comparable amount for fiscal year 1988. Funding for Federal staff costs totals $15,146,000, $297,000 more than the comparable $14,849,000 provided for 1988.

The Committee has recommended a large increase for the Local Veterans Employment Representative Program to comply with the requirements of the newly enacted Veterans Employment, Training and Counseling Amendments of 1988 (Public Law 100–323), signed by the President on May 20, 1988. This law requires the Secretary of Labor to fund 1,600 Local Veterans Employment Representatives plus associated administrative overhead.

This total staff is estimated to be 1,728, 360 more than in the budget request. The additional cost for this increased staff is $14,400,000, approximately $40,000 per staff year. In addition, the new law provides for the formal institutionalization of the National Veterans Employment and Training Institute. This Institute formerly funded by recaptured State grant funds is now to be directly funded and should be shown as a separate budget activity. The Committee recommends funding in the amount of $3,200,000 for the continued operation of the Institute.

The Committee recommendation also provides for built-in increases totaling $2,888,000 mainly reflecting State pay and benefit costs, plus Federal pay, health and retirement contributions, within-grade promotions, Federal Employees' Compensation Act costs and non-personal costs.

The recommended built-in decreases include reductions due to fewer permanent changes of station and 2 fewer days of pay in fiscal year 1989 than in fiscal year 1988.

The Committee has also approved a financing change to permit a shift of funds to allow for increased contracting.

OFFICE OF INSPECTOR GENERAL

1988 comparable appropriation	$37,051,000
1989 appropriation request	39,497,000
House allowance	39,497,000
Committee recommendation	40,222,000

The Committee recommends an appropriation of $40,222,000 for the Office of Inspector General. The recommendation is $3,171,000 more than the fiscal year 1988 appropriation of $37,051,000 for Federal funds, and $725,000 more than the administration request and the House allowance.

The recommendation includes general funds of $40,222,000 and trust funds of $5,701,000 to be transferred from the "Employment Security Administration" account in the unemployment trust fund and $515,000 from the black lung disability trust fund.

The Committee recommends 547 full-time equivalent [FTE] positions for the Office of Inspector General; this includes 71 positions financed by the transfers from trust funds. The total is 17 more FTE than the comparable number in fiscal year 1988.

The Office of Inspector General is charged with several duties: recommending policies to detect and prevent fraud, waste and abuse in Labor Department programs; increasing economy and efficiency; conducting, supervising and coordinating audits and investigations of Labor operations; and informing the Secretary and Congress about problems and corrective actions taken. The Office of Labor Racketeering investigates labor racketeering by organized criminal groups within employee benefits plans, labor-management relations and internal union affairs.

The recommended funding level includes mandatory increases for such items as: personnel benefits, within-grade promotions, pay increases effective in fiscal year 1988 and January 1989, audit contract costs, space rental, other services, costs of ADP contracts, supplies, equipment, communications, and utilities.

The recommendation includes 19 additional FTE for the Office of Labor Racketeering and 3 FTE for executive direction and management to participate in the President's Council on Integrity and Efficiency activities.

The recommendation, which is $725,000 over the budget request, includes resources to finance the new positions at the experience level of average salary, as well as necessary funds for more adequate security safeguards. Also included is a reduction of five FTE to reflect a change in the method of payment for Office of Audit activities.

TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES

ACQUIRED IMMUNE DEFICIENCY SYNDROME [AIDS]

1988 comparable appropriation	$926,269,000
1989 appropriation request	1,234,580,000
House allowance	1,234,580,000
Committee recommendation	1,244,580,000

The bill includes a total of $1,244,580,000 for Public Health Service [PHS] program activities associated with AIDS. This is $10,000,000 more than requested by the administration and provided by the House. Not included in this bill, but also within the PHS, is $65,420,000 for the AIDS activities of the Food and Drug Administration [FDA]. Together with FDA, the PHS total for use on AIDS is $1,310,000,000. This is an increase (including FDA funds) of $358,961,000 over the 1988 amount, or an increase of almost 38 percent. The appropriations for AIDS have grown dramatically over the past several years as shown below:

Fiscal year:	
1982	$5,555,000
1983	28,736,000
1984	61,460,000
1985	108,618,000
1986	233,793,000
1987	502,455,000
1988	951,039,000
1989	1,310,000,000

In addition to the amount the Committee expects to be spent by the PHS agencies in fiscal year 1989 on AIDS, the Federal Government will spend another $893,000,000 on AIDS treatment, testing, and research through Medicaid, Medicare, Social Security, the Department of Labor, the Department of Defense, the Veteran's Administration, the Department of State, and the Department of Justice. In summary, the Federal Government will spend well over $2,200,000,000 on AIDS in fiscal year 1989 as shown in the following table:

Public Health Service	$1,310,000,000
Medicaid (Federal share)	600,000,000
Medicare	25,000,000
Social Security Administration	111,000,000
Veterans Administration	66,000,000
Department of Defense	52,000,000
Department of Justice/Bureau of Prisons	6,000,000
Department of State	2,000,000
Department of Labor	1,000,000
Agency for International Development	30,000,000
Total	2,203,000,000

The following table shows the amount included in the bill for each PHS agency and institute along with the 1988 amounts, the President's budget request, and the amount provided by the House:

[In thousands of dollars]

	Fiscal year—				Recommendation compared with—		
	1988	1989 budget request	House passed	Committee recommendation	Fiscal year 1988	Fiscal year 1989 budget request	House passed
AIDS							
Health Resources and Services Administration	36,956	40,016	40,016	50,316	13,360	10,300	10,300
Centers for Disease Control	304,942	400,719	408,219	384,419	79,477	(16,300)	(23,800)
National Institutes of Health:							
National Cancer Institute	89,944	125,280	125,280	125,280	35,336		
National Heart, Lung, and Blood Institute	24,738	39,032	39,032	39,032	14,294		
National Institute of Dental Research	3,169	3,526	3,526	3,526	357		
National Institute of Diabetes and Digestive and Kidney Diseases	3,351	3,650	3,650	3,650	299		
National Institute of Neurological and Communicative Disorders and Stroke	12,212	13,393	13,393	13,393	1,181		
National Institute of Allergy and Infectious Diseases	223,383	310,268	310,268	323,268	99,885	13,000	13,000
National Institute of General Medical Sciences	2,394	11,100	11,100	11,100	8,706		
National Institute of Child Health and Human Development	14,292	20,443	20,443	22,443	8,151	2,000	2,000
National Eye Institute	3,830	4,947	4,947	4,947	1,117		
National Institute of Environmental Sciences	3,917	4,234	4,234	4,234	317		
National Institute on Aging	361	452	452	452	91		
National Institute of Arthritis and Musculoskeletal and Skin Diseases	660	687	687	687	27		
Research resources	50,418	38,010	38,010	38,010	(12,408)		
National Center for Nursing Research	510	707	707	707	197		
John E. Fogarty International Center	4,500	4,736	4,736	4,736	236		
Office of the Director	10,977	7,165	7,165	13,165	7,188	6,000	6,000
Buildings and facilities	19,150			10,000	(14,150)	10,000	10,000
Subtotal, NIH	467,806	587,630	587,630	618,630	150,824	31,000	31,000

Alcohol, Drug Abuse and Mental Health Administration	112,257	177,617	177,617	177,617	65,360		
Office of Minority Health	1,500	1,500	3,500	3,500	2,000	2,000	2,000
Contingency funds		15,000	7,500			(15,000)	(7,500)
Health Services research	1,000	9,000	7,000	7,000	6,000	(2,000)	
Public Health Service Management	1,808	3,098	3,098	3,098	1,290		
Total	926,269	1,234,580	1,234,580	1,244,580	318,311	10,000	10,000

Note: Numbers in parenthesis ( ) are negative.

Magnitude of the problem and response to date

In 1987, over 20,000 new cases of AIDS were reported, a 56-percent increase over 1986. In total, as of June 6, 1988, over 64,506 AIDS cases and more than 36,255 AIDS-related deaths in the United States have been reported to the Centers for Disease Control [CDC] since June 1981. Each of the 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, and the trust territories have reported cases of AIDS. In 1985, AIDS became the 11th leading cause of potential years of life lost before the age of 65, and in 1986 is expected to be 8th. As many as 1.5 million other Americans may be infected with the AIDS virus already.

The Committee is deeply impressed with the progress against AIDS that has been made in a relatively short period of time, more than against any other complex new disease in the history of medicine. On the scientific front, advances in epidemiological and biological research have enabled us to identify the virus that causes AIDS and to define its methods of transmission. A laboratory test to detect the presence of AIDS antibodies has been developed and is routinely used to insure a safe blood supply in this country. Clinical trials of two experimental AIDS vaccines are currently in progress in the United States. Additionally, the Department has established 19 new drug treatment and evaluation centers at medical centers around the country, where over 25 active research protocols are underway with an enrollment of over 3,200 patients. Pediatric AIDS clinical funds have been initiated.

The Committee continues to express its concern about the difficulty that each PHS agency has encountered in acquiring sufficient FTE's to most effectively utilize the dollar resources provided by this Committee. Therefore, the Committee has included bill language stating that no personnel ceiling may be imposed, or any action taken which would have the effect of restricting PHS programs from carrying out the activities funded by Congress in the Department of Health and Human Services Appropriations Act. Every major organizational review (including those recently by the Institute of Medicine and the President's Commission on AIDS) has concluded that a lack of FTE's has been a major obstacle in the PHS battle against AIDS.

The PHS should expand its research in pathogenesis and clinical manifestations to provide insight into the origins and nature of the disease, genetic and biological properties of isolated strains, individual susceptibility to infection, risk factors, and the various modes of transmission. Expansion is also included for the development of effective therapeutics and treatments to care for those persons already infected, and the development of a vaccine to prevent the disease. Finally, PHS should expand its information and education programs aimed at the public, school aged and college aged populations, individuals at increased risk of infection (including minorities and IV drug abusers), and health care workers, to encourage individuals to minimize behavior that risks spreading or contracting the disease.

The following funding table details the response to the AIDS crisis to date by major functional categories:

PUBLIC HEALTH SERVICE ACQUIRED IMMUNE DEFICIENCY SYNDROME

[In thousands of dollars]

Total Public Health Service (excluding FDA)	Fiscal year 1988 appropriation	Fiscal year 1989				
		Request	House action	Senate	Plus/minus request	Plus/minus House
Research:						
Disease studies and surveillance	275,779	385,071	385,071	370,771	(14,300)	(14,300)
Drug development	164,853	224,820	224,820	237,820	13,000	13,000
Vaccines development	53,915	80,417	80,417	80,417		
Health system/patient care	29,218	27,731	33,731	36,031	8,300	2,300
Multidisciplinary	92,205	70,746	70,746	86,746	16,000	16,000
Construction (nonadd)	(43,085)			(10,000)	(10,000)	(10,000)
Subtotal, research	615,970	788,785	794,785	811,785	23,000	17,000
Prevention:						
Information and education:						
Testing, counseling, and referral	61,183	82,738	82,738	82,738		
IV drug abuse control	76,447	129,048	129,048	129,048		
Other information and education	158,725	201,781	203,281	203,781		500
Subtotal	296,355	413,567	415,067	415,587		500
Other prevention [2]	13,944	17,228	17,228	17,228		
Subtotal, prevention	310,299	430,795	432,295	432,795		500
PHS contingency fund		15,000	7,500		(15,000)	(7,500)
PHS total	926,269	1,234,580	1,234,580	1,244,580	10,000	10,000

[1] Includes funds for construction grants under section 1610(b) of the PHS Act (House, $5,000,000).

[2] Includes activities for the prevention of transfusion-related AIDS, and for development and evaluation of diagnostic tests.

Note: Numbers in parenthesis ( ) are negative.

Health Resources and Services Administration

The Committee has included $50,316,000 for AIDS health care service demonstrations, and for training and education of health care workers. This is $10,300,000 more than the administration's request and $13,360,000 more than was provided in fiscal year 1988.

The Committee has added an additional $2,000,000 for pediatric AIDS service demonstration projects. The Committee remains greatly concerned with the increase in the number of pediatric AIDS cases and recommends $7,000,000 for these projects in fiscal year 1989. The pediatric AIDS service demonstrations enhance the delivery of pediatric health care by demonstrating effective ways to manage pediatric AIDS patients, and reduce time spent in hospital settings by emphasizing outpatient and community settings.

The Committee has provided $15,056,000 for AIDS service demonstrations projects, an increase of $4,489,000 over the administration's request. These funds are intended to continue support to existing demonstration projects and implement new grants to metropolitan areas which have not previously received grants.

The Committee has also added $4,000,000 for AIDS planning grants for States, municipalities, and consortia of municipalities or localities. The Committee is aware that with the increasing prevalence and incidence of HIV infection and AIDS it is important for States or municipalities to conduct assessments of the service delivery and educational needs of their communities and subsequently begin to prepare for providing coordinated care to an increasing HIV-infected population.

The Committee has provided $24,260,000 for training as follows: $12,882,000 to fund education and training projects for health care practitioners, $6,252,000 to fund the training of provider and nonprovider staff of federally funded health care facilities, and $5,126,000 to fund the development of curricula on diagnosis and treatment of HIV infection for health professions schools and training organizations.

Centers for Disease Control

The Committee has included $384,419,000 for AIDS prevention activities at the Centers for Disease Control. This is $79,477,000 more than was provided for fiscal year 1988 and $16,300,000 less than requested by the administration for fiscal year 1989.

The Committee has provided $44,590,000 for epidemiologic studies/laboratory studies, an increase of $8,322,000 over fiscal year 1988 and the same as the administration request. These funds will continue or increase all ongoing activities including an increase of $3,339,000 for international epidemiologic work.

The Committee has provided $78,460,000 for surveillance activities, a net increase of $15,803,000 over fiscal year 1988 and a net decrease of $16,300,000 below the administration request. The Committee denies the $22,000,000 associated with the national household seroprevalence survey, but supports the administration's request for special population surveys, which the Committee has increased by $5,700,000. The

Committee fully supports the special surveys and sentinel surveillance which will provide timely, periodic data required to assess the incidence and prevalence of HIV infection over time; the household seroprevalence survey would provide data only at one point in time and results would not be available until 1991. The increase of $5,700,000 would provide funding for the special population neonatal survey in order to provide national data on the prevalence and incidence of neonatal HIV infection and rates among women of child bearing age.

The Committee has provided $36,040,000 for public information and education, a decrease of $5,000,000 below the administration's request. The $5,000,000 decrease below the request is being redirected to activities for high-risk minority populations.

The Committee has provided the administration's request of $36,450,000 for school and college aged information and education activities, which is an increase of $6,534,000 over the fiscal year 1988 level of $29,916,000. Funds include an increase of $4,105,000 to expand support and technical assistance to all States and local departments in cities with the highest incidence of AIDS, which will add an additional 25 States for a total of 50 States and 15 local departments.

Resources include $184,800,000 for information and education activities among high-risk persons, an increase of $62,229,000 over the fiscal year 1988 level, and an increase of $5,000,000 over the administration's request. The $5,000,000 increase should be directed to specific activities aimed at reaching high-risk minority populations. In addition, resources include the administration's request of $4,079,000 for information and education activities among health care workers. The Committee has provided $102,376,000 to increase by $35,811,000 State prevention projects aimed at counseling and testing and partner referral among high-risk groups, and the total includes $20,000,000 for activities aimed at IV drug abusers. Total resources also include $28,492,000 for State prevention projects to complement the expanded counseling and testing program. The total includes $30,156,000 for State prevention projects to support special activities to reach minorities at risk, and $6,000,000 to initiate TB/AIDS demonstration projects to determine optimal approaches to preventing and controlling TB among persons with HIV infection.

National Institutes of Health

The Committee has provided $618,630,000 for AIDS-related activities of the National Institutes of Health. This is $31,000,000 more than the President's request and $150,824,000 more than provided for fiscal year 1988. A total of 830 FTE's are available for NIH AIDS activities, 250 more than requested.

The Committee has added $10,000,000 for AIDS facilities improvements for the acquisition, repair, renovation, modernization and expansion of existing research facilities, and purchase of associated equipment. For this purpose, $5,000,000 is provided for intramural and $5,000,000 for extramural facilities. Funds are not to be used for the construction of new facilities, and all grants are to be awarded competitively.

The Committee continues to be concerned with the alarming growth of pediatric AIDS, and believes that additional research efforts must be initiated in order that a prevention for and treatment of this disease in children be found. The Committee has, therefore, added $2,000,000 for additional pediatric AIDS research at the National Institute of Child Health.

The Committee is aware that a particularly important aspect of the AIDS program is the beneficial impact that it is having in other areas of research. However, the Committee is concerned that as the NIH AIDS research program continues to expand, other areas of research are losing FTE's. Therefore, the Committee is adding $6,000,000 to provide for approximately 200 additional FTE's for the NIH AIDS program.

HIV infection has generated a pressing need to develop and test experimental drugs and to make effective drugs widely available as soon as possible. The Committee acknowledges NIH's efforts in this area and understands that various drugs are being studied at NIH and through the AIDS clinical trial groups around the country. The Committee also understands that one of the most promising treatments being studied is a combination of AZT and a similar drug, dideoxycytidine [ddC], to reduce opportunistic infections and treat AIDS dementia by interfering with HIV replication. An additional $13,000,000 is being provided to support clinical trials. The Committee would encourage NIH to widen access to clinical trials but, at the same time, the Committee agrees that the NIH scientific standards not be compromised simply for the sake of initiating new trials. The sum of $6,000,000 has been added to expand general clinical trials and $7,000,000 has been added to expand pediatric clinical trials.

The Committee is pleased to learn that NIH has established the NIH AIDS Program Advisory Committee which is composed of extramural AIDS experts. The charge of the advisory committee is to advise the Director, NIH, on overall AIDS-related research directions, scientific opportunities, and major program initiatives to be undertaken by NIH. The advisory committee's review and advice are intended to assure that the NIH AIDS research program is internally consistent and that it complements efforts taking place in other non-Federal research settings.

It has also been learned that NIH has recently established a system to expedite the referral, review, and award process for research grant applications on AIDS. This system will enable the award of AIDS grants in 6 months.

Alcohol, Drug Abuse, and Mental Health Administration

The Committee has provided $177,617,000 for AIDS activities at the Alcohol, Drug Abuse, and Mental Health Administration [ADAMHA]. This is $65,360,000 or 58 percent more than provided in fiscal year 1988 and the same amount as requested by the President.

The allowance will support a broad range of AIDS-related basic and applied research, health professionals training, demonstration projects, and grants to expand treatment capacity. These activities focus on HIV's effects on the brain and nervous system as well as the biological and behavioral components of the transmission of AIDS. Each ADAMHA Institute has a significant AIDS agenda which will be advanced by the provided funding. The 1989 budget allowance will permit ADAMHA to continue and enhance efforts to meet the present needs for AIDS research, education, prevention, and treatment.

In response to the threat of AIDS transmission through intravenous drug use, the Committee has included $40,000,000 to establish a new treatment demonstration grants program to expand treatment capacity for intravenous drug abusers. Funding will be available to States, cities, and entities for use in areas with high rates of intravenous drug abuse and insufficient intravenous drug abuse treatment capacity (as evidenced by waiting lists for admission into intravenous drug abuse treatment programs).

The Committee is impressed with the ongoing NIDA demonstration programs targeted to intravenous [IV] drug abusers not in treatment and their sexual partners. By the end of 1988, AIDS prevention demonstration programs will have been established in approximately 50 cities. These programs use a variety of behavioral change methods to reinforce AIDS educational messages and to assist individuals in altering their risk behaviors. The focus is on outreach, education, HIV testing and counseling, and community involvement.

The Committee has also provided an additional $14,083,000 above the administration request and a total of $180,000,000 for the ADAMHA substance abuse block grant for the emergency treatment and rehabilitation of substance abusers within each State. The substance abuse block grant, though not specifically targeted for AIDS, involves many persons either with AIDS or in a position to contract AIDS from others.

Office of the Assistant Secretary for Health

The Committee has included $13,598,000 for AIDS activities at the Office of the Assistant Secretary for Health. This is $9,290,000 more than was provided in fiscal year 1988 and $15,000,000 less than requested by the administration for fiscal year 1989.

The Committee has provided $3,098,000 for the activities of the National AIDS Program Office, $7,000,000 for a variety of research projects conducted by the National Center for Health Services Research; and $3,500,000 for education and prevention efforts targeted toward minority populations carried out by the Office of Minority Health.

The Committee has rejected the requested increase of $15,000,000 for the contingency fund. The Committee feels that the 1989 AIDS request of $1,300,000,000 is sufficient to respond to any new opportunities that may arise during 1989.

ALZHEIMER'S DISEASE

The bill includes a total of $133,690,333 for all activities associated with Alzheimer's disease [AD]. This is an increase of $43,068,333 over the 1988 amount and $23,293,000 over the amount proposed in the

President's budget. The following table shows the amounts funded in this bill for each of the four agencies of the Department involved in the battle against AD, the National Institutes of Health [NIH]; the Alcohol, Drug Abuse, and Mental Health Administration [ADAMHA]; the Health Care Financing Administration [HCFA]; the Office of Human Development Services [OHDS]; as well as for the Office of the Secretary [OS].

	1987 appropriation	1988 appropriation	1989 President's budget	1989 allowance
NIH	$65,306,000	$79,927,000	$85,362,000	$107,818,000
ADAMHA	10,012,000	10,695,000	10,702,000	11,539,000
HCFA	395,338	....	14,333,333	14,333,333
OHDS	1,153,100	....	....	....
OS	200,000	....	....	....
Total	77,066,438	90,622,000	110,397,333	133,690,333

Magnitude of the problem and response to date

Although the exact number is not known, it is estimated that between 2.5 and 3 million Americans, including more than 8 percent of the U.S. elderly population, suffer from Alzheimer's disease. These estimates are based on numerous studies, many which only include data for institutionalized populations. Little is known about the prevalence of AD in the community, where some four-fifths of all older people with dementia may live.

For the past 15 to 20 years, scientists have been making steady, but slow progress in the battle against Alzheimer's disease. This past year, their efforts came together to produce several important advances in this field, generating excitement in the scientific and medical communities, as well as among the general public. In the space of a few months time, scientists announced the prospects for new inroads into understanding the genetics of the disease, and a potential treatment for some of its most serious symptoms.

In view of these recent achievements and the future impact of AD on the Nation's aging population, the Committee believes that the time is right to make a major investment in AD research. Therefore, the Committee has included resources to enable the Department of Health and Human Services to expand AD research funding by 48 percent over 1988. The following presents a description of the major activities to be conducted by the DHHS agencies involved in the AD effort.

National Institutes of Health

NIH funding for AD is provided primarily in the National Institute on Aging [NIA] and the National Institute of Neurological and Communicative Disorders and Stroke [NINCDS], as well as in five other appropriated accounts. The NIA supports basic, clinical, and epidemiologic studies of the etiology, diagnosis, and treatment of AD and other dementia of later life including: (1) the development of preclinical and diagnostic markers including biological, chemical, and behavioral markers of early stage AD; (2) the differential diagnosis of dementia including the development and investigation of screening batteries, neuropsychological batteries, neuroimaging techniques, clinical and neuropathologic assessments; (3) the role of genetic familial factors in the etiology of AD, and the relationship of viral and bacterial infection and environmental toxins in the etiology of AD; (4) the treatment and management of the underlying disease process and of the symptoms, including clinical trials of drugs, behavioral, social, and environmental interventions; and (5) the impact of AD on families, support networks, and formal health care systems. NINCDS research is also focusing on advances in molecular genetics, as well neuroimaging technology to determine the etiology of AD.

The Committee believes that there are a number of additional AD research opportunities at NIH and has, therefore, included in the bill increases of $20,356,000 for NIA and $2,100,000 for the National Center for Nursing Research over the President's budget request. This will bring the total for NIH AD research to $107,818,000. Further details on how these funds are to be used are included in the NIA section of the Committee report.

Alcohol, Drug Abuse, and Mental Health Administration

ADAMHA research has focused on identifying the nature and extent of structural change in the brains of Alzheimer's patients, developing a comprehensive approach to the neurochemical aspects of the disease, and developing drugs for managing behavioral problems of AD patients. ADAMHA has increased its focus on clinically relevant AD research in the areas of diagnosis, treatment, and services, including the search for diagnostic markers, studies of behavioral and somatic interventions to alleviate excess disability leading to improved patient coping and reduced family burden, studies on services in varied settings (home, community, nursing home), and research on the distinct clinical needs at different stages of Alzheimer's disease. For ADAMHA, the Committee has provided a minimum of $11,539,000. Increases are targeted for research and clinical training.

Health Care Financing Administration.

HCFA efforts will focus on health service demonstration projects aimed at identifying more effective and efficient methods of delivering health care to AD patients. The 1989 HCFA allowance for AD includes $13,333,333 for health service demonstration projects and $1,000,000 for related administrative costs. The $13,333,333 will be used to initiate about five new demonstration projects which are expected to be funded for 3 years with a total cost of $40,000,000. The initial awards are expected to be made in 1989. These projects will address a broad range of research questions aimed at improving health care quality and effectiveness for individuals with AD or related disorders. Specific health service research questions include cost, treatment modalities, case management, respite care service, et cetera.

At the present time, there is no way for HCFA to identify total Medicare and Medicaid cost of providing health care for AD patients because there is no separate diagnostic related group [DRG] for AD. The Committee urges HCFA to develop a method to assess the total cost of health care delivery for AD patients that will enable policy makers to be better informed on the overall Federal spending on AD.

Office of Human Development Services and Office of the Secretary

OHDS's Administration on Aging has supported a number of research and demonstration projects designed to develop and strengthen family- and community-based care for AD victims. In addition, the Office of Policy Research in OS does policy research on long-term care issues of which a small portion can be attributed to AD. The Department has not been able to identify estimates for 1988 and 1989, and the Committee has not added specific funding increases for AD in these accounts. However, the Committee urges that in future budget justifications, the Department develop a method to include estimates for AD spending in these accounts in the budget years.

The following table displays AD funding provided by the Committee by the broad purpose for which the funds are used:

	Fiscal year 1988 appropriation	Fiscal year 1989	
		President's budget	Allowance
Research projects:			
Etiology	$36,429,040	$39,237,080	$45,593,080
Diagnosis	15,857,000	16,725,460	19,725,460
Service delivery	8,448,800	9,206,050	11,706,050
Epidemiology	5,271,480	5,534,960	7,534,960
Research centers	14,921,000	15,928,750	21,428,750
New drug testing	2,198,240	2,346,680	3,346,680
Research training	3,871,680	4,186,010	6,286,010
Clinical training	2,023,000	1,186,000	2,023,000
Education and information	1,601,680	1,713,010	1,713,010
Health Service demonstration activities		14,333,333	14,333,333
Total	90,622,000	110,397,333	133,690,333

HEALTH RESOURCES AND SERVICES ADMINISTRATION

HEALTH RESOURCES AND SERVICES

1988 appropriation	$1,549,934,000
1989 appropriation request	1,408,073,000
House allowance	769,554,000
Committee recommendation	1,642,685,000

The Committee recommends an appropriation of $1,642,685,000 for health resources and services. This is $234,612,000 more than the administration request. The recommendation is $92,751,000 more than the fiscal year 1988 appropriation.

"Helping Build a Healthier Nation" is the new slogan of the Health Resources and Services Administration [HRSA]. The HRSA appropriation supports activities to provide health care services to mothers and infants, the underserved, the elderly, the homeless, migrant farmworkers, and a wide spectrum of other designated beneficiaries. This appropriation funds cooperative programs in community health, AIDS care demonstrations, health care provider training, and health care delivery systems and facilities.

HEALTH CARE DELIVERY AND ASSISTANCE

Community health centers

The Committee has included $419,850,000 for the Community Health Centers [CHC] Program. This amount is $19,850,000 more than the administration's request and $24,640,000 more than the fiscal year 1988 appropriation.

The primary objective of the Community Health Centers Program is to develop the capacity to organize and deliver primary care services to medically underserved and unserved populations, making optimum use of Federal, State, and local resources. It is noteworthy that Federal dollars provide less than one-half the cost of operations of these centers.

The Committee recognizes the success of the community and migrant health centers which, together with the National Health Service Corps, form the core Federal effort to provide direct health care services to the Nation's growing medically indigent population. During fiscal year 1988, some 540 community health centers will serve about 5.25 million medically underserved persons. These centers also serve as the focal point for the infant mortality initiative directed at reducing the rate at which American infants die in their first year of life.

The Committee has provided an increase of $19,850,000 over the administration request. Of that amount, $16,000,000 is to be used to supplement basic services. The Committee expects that HRSA will, as a first priority, restore funding to grantees that were funded below their recommended levels during fiscal year 1988. The remainder of the funding for basic health center services should be used to restore and enhance services and capacity at health centers.

The Committee continues to be alarmed by the persistent stagnation of this Nation's infant mortality rate. One concern that several witnesses have testified to is the difficulty in attracting and retaining obstetrical providers because of the prohibitive cost of medical malpractice insurance. The Committee has provided $3,850,000 to cover the costs of medical malpractice insurance for health care providers in the community and migrant health center programs. The Committee is concerned that many centers cannot attract or retain obstetrical providers, such as obstetrician-gynecologists, family practitioners, nurse midwives, and nurse practitioners, because their malpractice policies preclude their staff from providing delivery services. Therefore, the Committee has provided $3,850,000 to cover one-half the cost of medical malpractice insurance for approximately 450 obstetrical providers. The Committee expects that the centers would match the Federal contribution.

The Committee is concerned that the funding priorities of the Community Health Center program may not accurately reflect the increasing demographic trends of Asian Americans, as especially reflected in the populations on the west coast, including the State of Hawaii. The Committee particularly urges HRSA to ensure that efforts serving the

Asian-Pacific populations receive sufficient priority during this year's allocation of resources.

Migrant health

The Committee has included $46,200,000 for migrant health centers. This amount is $2,734,000 more than the fiscal year 1988 appropriation and $1,777,000 more than the administration's request.

The Migrant Health Program, through project grant authority, provides primary health care services to migrants and seasonal farm workers and their families. These services include care provided to high-risk mothers and infants and seasonal farm workers and their families with little or no public or private health insurance coverage. The 117 migrant health centers also serve as a focal point for the infant mortality initiative and, with the funds provided, an estimated 470,000 migrants and seasonal farm workers will be served.

Infant mortality initiative

The Committee recommends $20,800,000 to continue the infant mortality initiative. This is $800,000 more than the administration's request and $695,000 more than the amount available in 1988. The funds will continue support for case management and care coordination services to high-risk, low-income pregnant women through the community and migrant health centers.

In addition, the Committee does not intend that these funds be restricted to only those centers with existing perinatal capacity. Funding should also be used to assist centers to build or complete their basic perinatal systems. While case management and care coordination are two of the services to be financed through this initiative, funds could also be used to add medical and nursing personnel, permit extra credentialling of existing staff or upgrade liability coverage, or in special circumstances provide for inpatient services (for example, in cases in which centers with maternity centers are experiencing serious problems arranging for risk-appropriate deliveries for women who are too high risk to be managed by a birthing center). These perinatal capacity development efforts should be closely coordinated with the complementary effort of the National Health Service Corps program, in placing obstetrical providers in health centers located in areas with significant infant mortality and morbidity rates.

Home visitor study

The Committee is interested in innovative strategies to further reduce infant mortality. One such strategy is home visiting. Home visiting is a program designed to increase the favorable outcome of pregnancies for women at risk and their infants. Women at risk fit some or all of the following criteria: late registration or poor attendance for prenatal care, poor outcome in a previous pregnancy, extreme youth (under 19), absence of social supports, substance abusers, and those with less than a high school education.

The home visitor has the opportunity to detect risk factors that may not have been revealed during the office or clinic visit. The home visitor has the opportunity to explain and reinforce the providers instructions in a variety of areas such as nutrition, medications, substance abuse, early signs of labor, and the need for prenatal and other preventive care. The home visitor provides the pregnant woman with the opportunity to ask questions and receive culturally and age appropriate supportive advice. The home visitor acts as the case-manager and refers the pregnant woman for any and all available support services and assists her in actually obtaining needed care. The home visitor also assists in providing the new mother and family with preventive health care counseling and linkage to a medical home for the children.

The Committee directs the General Accounting Office [GAO] to conduct a study of home visitor projects which are currently operating, such as the resource mothers projects and home visitor programs in the United Kingdom. The study should provide an analysis of program interventions with pregnancy outcomes. In addition, the study should examine the most cost-effective method for implementing the program on a wider basis in the United States.

Black lung clinics

The Committee has included $3,255,000 for black lung clinics. This amount is the same as the fiscal year 1988 appropriation and the administration's request.

This program, through project grants or contracts, assists public and private entities to establish and operate clinics which provide for the analysis, examination, and treatment of respiratory and pulmonary impairments in coal miners. The clinics reduce the incidence of high-cost inpatient treatment for these conditions. With the funds provided, the program will continue to provide access to health care services for 47,500 victims of black lung disease.

Health care for the homeless

The Committee has included $15,000,000 to continue the program of grants to nonprofit organizations to provide outpatient health and mental health services to the homeless. This is the same as the administration request for this program, and $639,000 above the fiscal year 1988 appropriation.

The Committee recommendation of $15,000,000 would provide grants under section 1110 of the Social Security Act to public and nonprofit organizations to support routine, primary health care for the homeless. Preference would be given to applicants representing areas with sufficient concentrations of the homeless to ensure an acceptable level of cost efficiency in the deployment of health care resources.

Family planning

The Committee recommends $140,000,000 for family planning services. This amount is $337,000 more than the fiscal year 1988 appropriation. The Committee rejects the administration's proposal to block grant this program, and directs that it continue to be administered as a project grant program. The amount recommended includes sufficient funds to support an additional 60 full-time equivalents. The Committee has included a modest increase of $337,000 over the 1988 program and operating levels to compensate HRSA for its overhead costs of administering the program.

This program provides discretionary grant funds to States, local health departments, and private nonprofit groups to support the provision of voluntary family planning services primarily to low-income persons. The program functions through a network of clinics operated by the grantees.

National Health Service Corps

The Committee recommends $40,350,000 for the National Health Service Corps [NHSC] field program. This amount is $57,000 less than the fiscal year 1988 appropriation and $5,350,000 more than the administration request for this program.

The purpose of the National Health Service Corps program is to improve the delivery of health care services to health manpower shortage areas and to improve access to health care in these areas by the appropriate placement of health practitioners and resources. Funds are used to pay salaries of Corps personnel, to assist communities in developing National Health Service Corps sites, to recruit and assign personnel to health manpower shortage areas, and to establish and maintain health care delivery systems in these areas.

The Committee is aware that in many parts of the country there is a severe shortage of obstetrical care providers, especially in rural areas and low-income inner city neighborhoods. These areas reflect significant rates of infant mortality and morbidity. Health professionals available through the NHSC should be used to increase the capacity of organized health care providers like community and migrant health centers to reach out and to serve high-risk pregnant women, infants, and children.

The Committee intends that of the $40,350,000 provided, $35,000,000 be used for the continuation of current NHSC activities and $5,350,000 be used to pay the cost of placing and supporting approximately 248 obstetrical clinicians (165 physicians and 83 nurse practitioners and nurse midwives) in community and migrant health centers and in other organized settings located in designated health manpower shortage areas [HMSA's] with high infant mortality and morbidity rates. The Committee views this effort as an addition to, and a complementary part of, the special infant mortality initiative. While the Committee recognizes that the type of assignment is best decided by local project sites and Federal NHSC program managers, it wishes to state its expectation that, in the case of local project-salaried assignees (or PPA's), sufficient funds will be provided to the local projects to cover the full and adequate cost of such placements, including the cost of professional liability insurance coverage. It is the Committee's understanding that federally salaried NHSC assignees will be covered under the Federal Tort Claims Act.

Last year, the Committee expressed its concern that nurses were not being supported under the current program and HRSA responded by appointing several nurses to the Pacific Basin region. The Committee was pleased with this development and now urges HRSA to increase the number of nurses in the program. The Committee expects that this will be accomplished through the use of the grant authority contained in section 333(d) of the Public Health Service Act. The Committee further recommends that consideration also be given to assigning Corps personnel to the native Hawaiian maternal and child health centers.

National Health Service Corps loan repayment

The Committee recommends $8,002,000 for the loan repayment program, $5,800,000 more than the administration's request and $8,002,000 more than the fiscal year 1988 amount. The administration's proposal would have eliminated funding of the NHSC Scholarship Program in favor of the loan repayment approach.

The Committee is supportive of a repayment program option as an alternative to the NHSC Scholarship Program. The loan repayment program would produce highly motivated, committed practitioners for both the NHSC and the Indian Health Service with far less administrative burden and risk of obligor default. However, it is the Committee's belief that funds should continue to be appropriated for the NHSC Scholarship Program to provide recipients of exceptional financial need scholarships an opportunity to proceed with their health professions education without interruption or the need to seek alternative sources of financial aid.

The Committee intends that of the $8,002,000 provided, $5,800,000 will be used to provide loan repayment assistance to obstetrical providers, including obstetrician-gynecologists, family practitioners, obstetrical nurse practitioners, and nurse-midwives, who will serve in designated health manpower shortage areas [HMSA's] with significant infant mortality or morbidity problems. The Committee expects that these funds will be used to cover the first year of 2-year, 3-year, or 4-year loan repayment contracts with the health care provider. The recommendation would permit assistance to approximately 70 physicians and 70 nurse practitioners/nurse midwives. The remaining funds would be used to provide loan repayment assistance to other eligible health professionals placed in designated HMSA's.

The Committee is concerned over suggestions by the Public Health Service that management of the newly authorized National Health Service Corps loan repayment program may be delegated to State or regional offices.

The Committee notes that the loan repayment program was authorized by the Congress with the intent of providing a coordinated, effective method for increasing the supply of Corps professionals to health manpower shortage areas. The Committee believes that adequate coordination of the new program and effective placement of health professionals require centrally located management. Therefore, the Committee urges the Public Health Service to administer the loan repayment program at the Federal level.

Hansens disease

The Committee has included $18,245,000 for the Hansen's Disease Program, the same as the administration request and the appropriation for fiscal year 1988.

The funds allowed would support continued health care to a rotating resident population of approximately 200 patients at Carville, 3,600 patients now being served by the 13 sites of the regional Hansen's Disease Program, and continued support of the existing training and research activities at Carville.

Payment to Hawaii

The Committee has included $3,300,000 for the payment to Hawaii. This is $141,000 more than the administration's request and the fiscal year 1988 appropriation.

Payments are made to the State of Hawaii to partially support the cost for care and treatment of persons with Hansen's disease.

Office of Rural Health Policy

The Committee recommends $1,500,000 for HRSA's Office of Rural Health Policy. This amount is $64,000 more than the fiscal year 1988 appropriation and the same as the the administration request.

The funds will support the Office as the departmental focal point for coordinating national efforts to strengthen and improve the delivery of health services to populations in rural areas. The funds will also continue support for rural health policy and research grants. The Office also operates a clearinghouse for the collection and dissemination of information and research findings related to the delivery of health services in rural areas. The Committee recommendation supports grants, contracts, and administration of the Office of Rural Health Policy.

Congress included funding in the fiscal year 1987 appropriations act, Public Law 99-500, for the National Center for Health Services Research [NCHSR] to set a research agenda for rural health research. NCHSR held the conference last December, bringing together 200 health professionals and policymakers, and produced a detailed agenda for rural health research. The Committee strongly encourages the Office of Rural Health Policy to utilize that agenda in awarding grant moneys for rural health research.

Health care services in the home

The Committee recommends $4,787,000 for health care services in the home, the same as the amount appropriated in fiscal year 1988. The administration did not request funding of this program in 1989. This program provides grants to States for demonstration projects to identify and assist individuals who could avoid institutionalization if home health services were made available and to coordinate the provision of health services and other long-term care services in the home.

Federal employee occupational health

The Committee concludes that it is in the best interest of Federal employees for the Public Health Service to continue to operate health clinics throughout the Government under reimbursable agreements and to staff those health units with full-time Federal occupational health professional positions, whenever possible. The Committee understands that Federal personnel staffing has been reduced through a planned retraining and attrition process even though 10 additional health units have been acquired in the past 4 years. In order to avoid a reduction-in-force and personnel and program disruptions and to assure quality health care for Federal employees, the Committee expects that the U.S. Public Health Service will make every effort to maintain and hire qualified occupational health professionals whenever possible.

HEALTH PROFESSIONS

For health professions, the bill includes $217,324,000, an increase of $5,367,000 over the fiscal year 1988 appropriation. The House deferred action on these programs. The administration requested $40,000,000 as a consolidated grant for these programs. The Committee rejects the administration's proposal to consolidate these individual health professions programs into one program. These national programs significantly influence the type and quality of health care available to current and future generations of Americans. The programs address the need to assure Americans of high-quality health care by competent practitioners, to keep the doors of our health professions schools open to academically qualified students, regardless of their economic background, and to improve the training opportunities available to health care personnel in the treatment of infants and children, people infected with AIDS, and an increasing elderly American population.

Exceptional financial need scholarships

The Committee recommends $6,702,000 for the Exceptional Financial Need Scholarship Program. This is the same as the appropriation for fiscal year 1988. No funds were requested by the administration for this activity in fiscal year 1989.

This program assists persons with limited resources to enter a health professions school by providing students in their first year of postbaccalaureate study with comprehensive scholarship support. Priority is given to medical, osteopathy, and dentistry schools. These students, because of their economic background, often find it very difficult to take on major loan commitments while they are trying to establish their ability to pursue educational training.

Excellence in minority health

In fiscal year 1988, this Committee added the excellence in minority health program to the HRSA appropriation as a means of strengthening the national capacity to educate minority students in the health professions. The Committee is including $9,574,000 in this year's bill, the same as was appropriated in 1988. The administration failed to request any funds for this important initiative.

This program is directed toward those institutions which have produced a significant proportion of the Nation's minority health professionals. The funds made available are to be used for recruitment and academic support of students, curricula development, faculty training and improvements, and institutional planning and upgrading. The Committee directs that not more than seven schools are eligible for this program.

Public health capitation

The Committee allows $4,787,000 for the Public Health Capitation Program for fiscal year 1989. This is the same as the appropriation for fiscal year 1988. No funds were requested by the administration for this program for fiscal year 1989.

Public health capitation grants provide financial support to 24 schools of public health with an estimated enrollment of 8,426 to assist them in meeting the costs of their educational programs. Support of these schools is integral to the national initiative to improve the health status of Americans through health promotion and disease prevention programs and to provide for an adequate supply of public health personnel who frequently deal with catastrophic health care problems and crisis disease situations.

Graduate programs in health administration

The Committee recommends $1,436,000 for graduate programs in health administration for fiscal year 1989. This is the same as the appropriation for fiscal year 1988. The administration did not request funding for this program for fiscal year 1989.

This program provides grants to public or nonprofit private educational entities, including schools of social work but excluding schools of public health, to support the expansion and improvement of graduate programs in health administration, hospital administration, and health planning. These programs are experiencing increasing financial pressures at the very time they are being asked to produce administrators for an ever-changing health care system in which competition, cost containment, and technological change requires skills, knowledge, and abilities not thus far available.

Public health traineeships

The Committee has included $2,872,000 for public health traineeships for fiscal year 1989. This is the same as the appropriation for fiscal year 1988. The administration requested no funds for this program for fiscal year 1989.

This program provides grants to schools of public health in order to award traineeships to graduate students in public health to improve the capability of the health care system to respond to new challenges resulting from an economically and socially complex and changing society. To accomplish this, the program supports specialized training of health professions personnel in high-priority targeted public health fields such as biostatistics, epidemiology, nutrition, environmental health, occupational health, and maternal and child health. This specialized training enables health professionals to deal more effectively with catastrophic health care problems and crisis disease situations, such as acquired immune deficiency syndrome.

Health administration traineeships

The Committee has included $479,000 for the Health Administration Traineeships Program for fiscal year 1989. This is the same as the appropriation for fiscal year 1988. The administration did not request funding for this activity for fiscal year 1989.

Grants are awarded to public or nonprofit educational institutions, excluding schools of public health, to support traineeships for graduate study in accredited programs in health administration, hospital administration, or health policy analysis and planning so that health administrators and managers are prepared to address the increasingly complex health care system. The Committee recognized that major changes in ownership of health care facilities, trends toward profit making, marketing, increased use of ambulatory care, and the impact of changes in the financing of health care require administrators and managers with skills and sophistication in many new areas.

Preventive medicine residencies

The Committee recommends $1,532,000 for the Preventive Medicine Residencies Program for fiscal year 1989. This is the same level as the 1988 appropriation. The administration requested no funds for this program in fiscal year 1989.

The Nation is facing a projected shortage of 1,750 preventive medicine physicians by 1990. This program provides grants and contracts to schools of medicine, osteopathy, and public health to support the planning, development, and operation of physician residency training programs in preventive medicine. The program also provides financial assistance to residents who plan to specialize or work in preventive medicine. Physicians trained in preventive medicine help reduce the need for and consequently the cost of health care.

Family medicine/general dentistry residencies and training

The Committee recommends $35,405,000 for the Family Medicine and General Dentistry Residencies and Training Program for fiscal year 1989. This is the same as the fiscal year 1988 appropriation. The administration requested no funds for this program in fiscal year 1989.

This program provides grants and contracts to hospitals and medical and dental schools to support predoctoral, internship, faculty development, and residency programs in family medicine and residency programs in general dentistry. The program also provides financial assistance to students who plan to practice family medicine. The Committee believes that primary care training leads to long-term savings since primary care practice emphasizes health promotion and disease prevention as well as curative care and less expensive outpatient care. Family physicians, in particular, are meeting community needs for patient care from small towns to core inner cities.

General internal medicine and pediatrics

The Committee recommends $17,712,000 for the General Internal Medicine and Pediatrics Program for fiscal year 1989. This amount is the same as the 1988 appropriation. No funds were requested by the administration for this program in fiscal year 1989.

This program provides grants and contracts to hospitals and medical schools to support residencies in internal medicine and pediatrics. The program helps maintain a sufficient supply of physicians oriented to programs which emphasize ambulatory care, comprehensive health care and nonclinical areas relevant to the practitioner of general internal medicine and general pediatrics.

Family medicine departments

The Committee has included $6,702,000 for family medicine departments for fiscal year 1989. This is the same as the appropriation for fiscal year 1988. The administration did not request funding of this program in 1989.

The Family Medicine Departments Program provides grants to schools of medicine to establish and maintain academic and administrative units to provide clinical instruction in family medicine. Program activities include curriculum components for medical students with increased emphasis on the prevention, recognition, and treatment of alcohol abuse and alcoholism which are developed and integrated into the family medicine unit. These funds will support approximately 57 projects involving over 11,000 individuals participating in the programs.

Physician assistants

The Committee has recommended $4,596,000 for the Physician Assistants Program in fiscal year 1989. This is the same level as the appropriation for fiscal year 1988. No funds were requested by the administration for physician assistant training for fiscal year 1989.

The Physician Assistants Program, through grants or contracts to schools of medicine and osteopathy and other public or nonprofit private entities, supports the development and maintenance of physician assistant training programs. Physician assistants principally practice primary medical care. Studies have shown that with the addition of physician assistants to a physician's practice, productivity of the practice may increase by as much as 50 percent and that average charges to patients or third party payers are lower than traditional practices.

Area health education centers

The Committee recommends $17,233,000 for area health education centers [AHEC's] for fiscal year 1989, the same as the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

The primary purpose of the AHEC Program is to attract and retain primary care professionals in shortage areas by linking academic resources of health sciences centers to the clinical challenges of underserved communities, including rural areas. Funds are awarded to medical and osteopathic schools and will support an estimated 30 AHEC projects.

The Committee remains interested in the possibility that the pressing health care needs of the Pacific Basin region might best be addressed by the establishment of a Pacific Basin AHEC. In the past HRSA has demonstrated sufficient administrative flexibility to address unique situations such as this, and the Committee further notes that the Senate authorization committee has similarly recommended such an arrangement. HRSA is accordingly urged to give this possibility every consideration.

Health professions data analysis

The Committee has included $1,915,000 for the Health Professions Analytical Studies and Reports Program for fiscal year 1989. This is the same as the appropriation for 1988. No funds were requested by the administration for this program in fiscal year 1989.

This program provides resources essential for the formulation of national health policy through the collection and analysis of information and data on the health professions not available through any other source. These funds are also used for properly identifying, designating, and reviewing health professions shortage areas and mental health shortage areas throughout the country.

For the past 8 years, the Committee has urged HRSA to develop comprehensive generic-oriented mental health shortage designations in order to ensure that the most up-to-date information is made available for this project in earlier budgets. The Committee understands that these designations will be announced this fall, and looks forward to receiving accurate health manpower data in this area.

Disadvantaged assistance

The Committee has recommended $27,406,000 for the Disadvantaged Assistance Program in fiscal year 1989. This is the same as the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

The Disadvantaged Assistance Program is the principal Federal health training activity for underrepresented minorities and other students who are financially or otherwise disadvantaged and who are interested in pursuing a health career. Awards are made through grants and contracts directly to public and nonprofit private health or educational entities to support recruitment, retention, and placement of students. Stipend support is available (20 percent of the amount appropriated) for over 500 disadvantaged students of exceptional financial need who are enrolled in a school of medicine, osteopathy, or dentistry.

The Committee appreciates the efforts of the Health Careers Opportunity Program [HCOP] to ensure that a wide range of health career opportunities are available to our Nation's minorities. The Committee would be especially supportive of the Department supporting quality proposals from schools of social work, assuming that there is a clear health-related training focus, such as working with AIDS patients and their families.

Health professions special initiatives

The Committee recommends $2,394,000 for the Health Professions Special Education Initiatives Program in fiscal year 1989. This is the same as the 1988 appropriation. The administration did not request any funds for this program in fiscal year 1989.

The Health Professions Special Education Initiatives Program supports targeted high-priority crisis prevention activities which are in the national interest. Funds are awarded through grants and contracts to health professions institutions and other entities to carry out special educational training programs in geriatrics, health economics, health promotion and disease prevention, and computer simulated medical procedures, such as arthroscopy.

The Committee is concerned over this country's critical shortage, as well as the maldistribution of podiatrists and the impact on individuals, particularly high-risk elderly persons, living in medically underserved urban and rural communities. Given the growing foot care needs of the elderly, the Committee directs that current efforts to provide clinical training in underserved areas be continued, and that HRSA address the demand for change in the curriculum in colleges and podiatric medicine.

Geriatric training initiative

The Committee has included $14,000,000 for programs in geriatric health care training. This is $1,554,000 more than the 1988 appropriation. The administration did not request any funds for this program in fiscal year 1989.

The Committee recognizes that there is a severe shortage of geriatric physician faculty in addition to physicians and other health professionals who are trained to meet the special needs of our growing elderly population. The Committee is very concerned about the future trends in health care for the aged. Between now and the year 2000, the size of the population group aged 55 and older is expected to increase 19 percent; aged 65 and older will increase 27 percent; and aged 75 and older will increase by over 50 percent. The recommendation includes $10,000,000 to continue geriatric education centers [GEC's], and $4,000,000 to continue geriatric training of physicians and dentists.

Two-year schools of osteopathy and medicine

The Committee has included $479,000 for curriculum and program development at 2-year schools of osteopathy and medicine. This is the same amount as the fiscal year 1988 appropriation. The administration requested no funding for this program. These funds will assist eligible institutions providing the first or last years of education leading to the degree of doctor of medicine or osteopathy to maintain or improve the quality of their programs. Such improvements may be for medical libraries, for schools without libraries, for construction and the purchase of equipment, as well as for other projects in schools already in existence.

Pediatric emergency medical services

The Committee recommends $3,000,000 for the Pediatric Emergency Medical Services [EMSC] Program. The recommended amount is $1,085,000 more than the fiscal year 1988 appropriation. No funds were requested by the administration for this program in fiscal year 1989. The Emergency Medical Services for Children Program was created to enhance and expand upon the delivery of emergency medical services [EMS] for acutely ill and seriously injured children, and reflects the recognition that the needs of such children tend to be different from those of adults and are often not being met by the current EMS systems both during the prehospital and in-hospital phases.

The Committee understands that presently there are 12 ongoing pediatric-EMS projects supported by the Department. This represents a sufficient critical mass of information for the Department to refine system development approaches to be recommended to the States. Accordingly, the Committee feels that the funds provided by this bill could best be utilized to continue support for the existing projects, rather than begin a new grant cycle.

Pacific Basin initiative

The Committee recommends $2,500,000 to continue the various Pacific Basin preventive health care initiatives. The recommended amount is $174,000 more than the fiscal year 1988 appropriation. No funds were requested by the administration for this program in fiscal year 1989. The funds will be used to continue implementing the recommendations of the U.S. Public Health Service's 1984 "Report on Health Services in the United States Pacific Island Jurisdictions."

The Committee was pleased to learn that the State of Hawaii has taken the lead in ensuring that the various Pacific Basin Governors will develop a coordinated strategy to address priority needs. The Committee directs HRSA to work closely with the newly established Pacific Basin Health Promotion and Development Center to ensure that projects funded this year relate directly to a coordinated strategy. Examples of projects funded last year include: the development of a unified and practical data system, efforts to increase nurse manpower resources, the development of technical skills for health personnel, and a special support program for National Health Service Corps personnel in the Pacific basin.

Advanced nurse education

The Committee recommends $17,500,000 for advanced nurse training for fiscal year 1989. This amount is $745,000 more than the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

This program provides institutional support, through grants or contracts, to nursing schools to strengthen and expand graduate nurse training at the masters or doctoral level leading to the development of clinical nurse specialists, teachers, administrators, and supervisors.

The Committee restates its concern that the Advance Nurse Training Program fund quality mental health-related training applications. There is a distinct shortage of mental health nurse practitioners and the Committee does not intend that the National Institute of Mental Health [NIMH] be the sole source of training for these programs. The Committee has no objection to jointly funded programs. However, HHS shall no longer ignore the Committee's intent regarding this matter. The Committee is also concerned that nationwide there appears to be a significant shortage of Asian American applicants for nursing programs. The various nursing education initiatives are urged to give special attention to this matter and the Director is requested to provide the Committee with a report describing her efforts to ensure that this trend is modified.

Nurse practitioners and nurse midwives

The Committee has included $12,000,000 for the Nurse Practitioner Program for fiscal year 1989. This is $511,000 more than the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

This program provides grants to public or nonprofit hospitals and other entities to plan, develop, and operate programs to train nurse practitioners in primary health care, and to improve educational programs to assure competency of primary health care providers.

Nurse special projects

The Committee recommends $9,500,000 for nursing special projects for fiscal year 1989. This is $405,000 more than the appropriation for 1988. No funds were requested by the administration for this program in fiscal year 1989.

This program provides grants and contracts to nursing schools and other institutions to develop innovative nursing methods, especially for treating high-risk groups such as the elderly, children, and pregnant women. The program also is designed to increase educational opportunities for individuals from disadvantaged backgrounds to enter the nursing profession, to upgrade the skills of licensed practical nurses, nursing assistants, and other paraprofessional nursing personnel, and to address other areas in primary care nursing activities.

The Committee requests HRSA to conduct a study on the projected manpower needs for the various nursing advanced trained specialties, such as nurse midwives and nurse anesthetists. The Committee expects this study to include projected needs for the next 10 to 20 years and the results should clearly quantify the future manpower objectives of the several nurse education programs. The Committee expects the study results to be reported no later than January 1990.

Nurse demonstration projects

The Committee recommends $2,700,000 for nurse demonstration projects for fiscal year 1989. This is $115,000 more than the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

The Committee recognizes that special nurse demonstration project initiatives are intended to forge closer relationships between nursing education and clinical practice through demonstrations of: clinical nurse education programs; methods to improve access in noninstitutional settings; and methods to encourage nursing graduates to practice in health manpower shortage areas. The Committee believes that results from this program will improve the public's access to health care, especially for the elderly.

Professional nurse traineeships

The Committee has included $13,000,000 for the Professional Nurse Traineeships Program for fiscal year 1989. This is $554,000 more than the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

The nurse traineeships program provides individual support to professional nurses receiving advanced educational preparation for administrative or supervisory positions or to serve in other professional nurse specialties.

The Committee is keenly aware of the shortage of adequately prepared leadership personnel in nursing. In fiscal year 1984, there were an estimated 90,500 registered nurses prepared at the advanced level. It is projected that by the year 2000 at least 500,000 registered nurses should have postbaccalaureate training to keep abreast of changing technologies occurring in the health care delivery system.

Nurse anesthetists

The Committee has recommended $800,000 for the Nurse Anesthetists Program for fiscal year 1989. This is $34,000 more than the fiscal year 1988 appropriation. No funds were requested by the administration for this program in fiscal year 1989.

This program funds grants to public or private nonprofit institutions to cover the costs of traineeships for the training of licensed, registered nurses to be nurse anesthetists. Approximately one-half of all anesthesia care in the United States is provided by nurse anesthetists, and over two-thirds of the current supply of nurse anesthetists deliver cost-effective services in small hospital settings in medically underserved areas.

Nurse faculty fellowships

The Committee recommends $1,100,000 for nurse faculty fellowships for fiscal year 1989. This amount is $190,000 more than the appropriation for fiscal year 1988. No funds were requested by the administration for this program in fiscal year 1989.

The Committee is aware of the Institute of Medicine study reporting that State boards of nursing were increasingly requiring that the deans and faculty of nursing schools hold graduate degrees. However, low numbers of nursing faculty with advanced degrees, particularly doctorates, suggest a scarcity of nurse faculty with adequate academic credentials to meet those requirements. To address this trend, the nurse faculty fellowships support advanced training of faculty who already hold a baccalaureate degree and are currently teaching in schools of nursing.

MATERNAL AND CHILD HEALTH AND RESOURCES DEVELOPMENT

Maternal and child health block grant

The Committee recommends $561,000,000 for the Maternal and Child Health [MCH] Block Grant Program. This is the same as the administration request and $34,430,000 more than the fiscal year 1988 appropriation. The Committee recommendation represents the fully authorized level of funding for this program.

The MCH block grant is a principal source of support to assist the States in their efforts to provide adequate health care for mothers and children who otherwise do not have access to such care.

The Committee directs that, of the amount recommended, $476,850,000 be distributed to the States as block grants to support projects designed to improve the quality and availability of services for mothers and children, and $84,150,000 be used for special projects of regional or national significance [SPRANS].

The Committee is very pleased with MCH's efforts to address the pressing health care needs of native Hawaiian families and children. Last year the Office of Technology Assessment [OTA] reported that the overall native Hawaiian death rate is 34 percent higher than that of the rest of the Nation with full-blooded Hawaiians having a death rate 146 percent higher than the Nation as a whole. Native Hawaiian children and youth were found to be particularly at risk. The Committee feels that the MCH supported Native Hawaiian maternal and child health centers being administered by the Kamehameha Schools/Bishop Estate are an excellent vehicle for addressing these pressing needs and urges MCH to continue its support.

The Committee has learned that Cooley's anemia patients who are facing opportunities for a longer life and an improved quality of life, because of improvements in therapy, are now attempting to organize a national patient self-support group to encourage members to utilize the most up to date, but admittedly difficult, therapies for iron overload, and to assist members in obtaining appropriate job finding and education skills. The Committee is most supportive of this development and strongly urges MCH to assist this effort in any appropriate manner possible.

The Committee is pleased with the highly successful results achieved through the Hemophilia Treatment Centers Program, which have played a significant role in reducing costly hospitalization of persons with hemophilia and assisting them in their desire to lead full and productive lives in their communities. While substantial gains have been realized, the Committee is concerned that due to limited resources available to the Centers, the program has been able to provide comprehensive services to only half of the hemophilia population, with the rest only having available fragmented services and lacking access to state-of-the-art treatment, as well as risk reduction and counselling support. This situation has been aggravated by the increasing impact of HIV/ AIDS on the hemophilia population. Consequently, the Committee has provided sufficient funds for HRSA to give consideration to strengthening and expanding the Hemophilia Treatment Centers Program.

Organ transplants

The bill includes $5,000,000 for HRSA organ transplant activities. The amount provided is a decrease of $1,032,000 below the fiscal year 1988 appropriation and $1,000,000 more than the administration budget request.

The Committee recommendation includes $1,500,000 to continue development of a scientific registry of organ transplant recipients leading to evaluation of the scientific and clinical status of organ transplantation; $1,500,000 to extend the national network which matches organ donors with potential recipients or organs; $1,500,000 to operate HRSA's Office of Organ Transplantation, which includes support agency staff providing clearinghouse and technical assistance functions; and, $500,000 to continue and maintain the Federal Government's working relationship and presence with Organ Procurement Organizations, through conferences and problem solving workshops to involve and educate the public and health professionals about organ donations and organ transplants.

Health teaching facilities interest subsidies

The Committee recommends $500,000 for interest subsidies for three health professions teaching facilities. This is $404,000 more than the 1988 appropriation and the same as the administration's request for fiscal year 1989.

ACQUIRED IMMUNE DEFICIENCY SYNDROME [AIDS]

The Committee has included $50,316,000 for AIDS health care and pediatric health care demonstrations, training and education for health care workers, and training for AIDS counselors. This amount is $13,360,000 more than the comparable fiscal year 1988 appropriation and $10,300,000 more than the administration request.

AIDS service demonstrations

As the AIDS epidemic continues to spread, communities throughout the Nation are being faced with the need to organize for the care of AIDS patients. The development of appropriate systems of care requires that communities implement an organized process of community needs assessment, and that resources be deployed in a way which adequately and efficiently responds to that need. These communities require technical assistance in carrying out this process. In fiscal year 1986 and fiscal year 1987, $26,000,000 was appropriated to fund service demonstration projects in four cities with the highest incidence of AIDS. In fiscal year 1988, $14,361,000 was added to fund new demonstration activities in 16 more metropolitan areas which reported the largest numbers of AIDS cases. An additional $4,787,000 was appropriated to initiate demonstration projects in communities with large numbers of pediatric AIDS sufferers.

The Committee has included a total of $19,056,000 for the AIDS Service Demonstration Projects. Of this amount, $15,056,000, is for continuation of demonstration activities at current sites and funding of new grants to metropolitan areas which have not previously received service demonstration grants. The Committee believes that these projects are responding to the ever increasing demand for health care services for AIDS patients and should continue as the Federal Government looks to ways in which it can help meet the astronomical costs currently projected for AIDS-related health care.

In addition, the Committee has provided $4,000,000 for health care planning grants for the States. During the last 3 years, the Congress has appropriated funds for AIDS Service Demonstration Grants in high incidence cities. These funds have assisted SMSA's with large numbers of HIV-infected individuals in establishing systems of care that focus on providing out-of-hospital services through coordinated case management.

Since the initial establishment of the AIDS Service Demonstration Program, it has become increasingly clear that the prevalence and incidence of HIV-infected individuals is spreading to all States and smaller metropolitan areas and that these cities need assistance in preparing to deliver services to HIV-infected individuals. While the expectation is that States and small cities can certainly profit from the experience of the existing demonstration grants, each entity must approach the epidemic from their unique perspective. Toward that end, the Committee has included $4,000,000 to expand the AIDS Service Demonstration Program to include planning grants for States and small cities that have not been affected by the epidemic to the same extent as the high incidence cities. HRSA is requested to compile and evaluate these plans for the benefit of the Congress in its further consideration of these complex issues.

The Committee is very much aware of the discrimination faced by people with HIV and is concerned that advocacy services be available to those who need them. Therefore, the Committee urges HRSA to include, as part of its demonstration projects, advocacy services for persons with HIV infection to avail themselves of existing Federal, State and local laws providing nondiscrimination protection.

The Committee also believes the HRSA demonstration projects should include the provision and/or coordination of mental health services.

Pediatric AIDS service demonstrations

Minority children comprise the vast majority of pediatric AIDS cases, and many victims reside in areas where suitable health care is unavailable or unaccessible. Service demonstration projects can provide valuable models for the design of systems of care and coordination by other affected communities.

The Committee recommendation includes $7,000,000 for pediatric AIDS health care service demonstration grants. This amount is $2,000,000 more than the administration request, and $2,213,000 more than last year's appropriation.

The Committee recommends that a portion of additional funds be utilized for the provision of developmental service including, but not limited to, occupational therapy, physical therapy, and speech-language pathology. Care coordination is a critical component in the effective delivery of these vitally needed services. The Committee expects grantees to include community-based organizations involved in service provision to minority populations.

The Committee strongly encourages that, whenever possible, these service demonstrations be conducted by the same entity as the AIDS service demonstration grants, in order to build a more comprehensive network of services.

AIDS education and training centers

More than 2 million primary health care providers and community service workers at inpatient and outpatient facilities throughout the United States will have to become prepared to deal with the physical, social, and psychological impact of AIDS. Furthermore, nonprofessional staff of health care facilities and students in the health professions must learn about the care, treatment, and counseling of AIDS patients and HIV-infected individuals. The Committee recommends $12,882,000 to fund education and training projects for health care practitioners, $6,252,000 to fund the training of provider and nonprovider staff of federally funded health care facilities, and $5,126,000 to fund the development of curricula on diagnosis and treatment of HIV infection for health professions schools and training organizations.

The Committee recommends $12,882,000 for education and training centers [ETC's], the same as the administration request. At this level, five new ETC's can be funded. The Committee is concerned that ETC's which serve large metropolitan areas do not have the resources to cover their entire area. This is especially true when one city within that area may, by national standards, have a severe problem, exhausting most of the ETC's resources, leaving little time and funds for the remaining localities. In establishing the five new centers, the Committee directs HRSA to assess applications from entities seeking relief from this type of problem as new applicants, despite the fact that they may be within the jurisdiction of a currently funded ETC.

For example, the New York-based ETC is attempting to work well with a New Jersey statewide network, but money allocated for this high incidence area, including New York City and Newark, is inadequate. The Committee hopes that in areas such as this, of the five new centers provided for in the administration request, ETC's can be funded in areas such as this.

It is the Committee's intent that HRSA be allowed to use necessary amounts authorized for AIDS to offset support costs required to conduct new and ongoing AIDS activities.

The Committee is pleased at how rapidly the Bureau of Maternal and Child Health and Resources Development has moved in making operational the AIDS Service Delivery Programs including the AIDS Drug Reimbursement Program, the AIDS Education and Training Centers Program [ETC's], and the AIDS Service Demonstration Program. The Committee is concerned that proposed administrative changes in the

Health Resources and Services Administration to transfer the ETC's to another administrative unit might serve to disrupt the progress and thus would urge postponing the administrative changes until all the ETC's are firmly established. The Committee is encouraged by the linkages between the Service Demonstration Projects and the ETC's and does not want to see organizational changes disturb that coordination.

PROGRAM MANAGEMENT/PROGRAM SUPPORT

National practitioner data bank

The Committee recommends $2,800,000 for the national practitioner data bank, formerly known as the health care quality improvement data bank. This is the same as the administration request. There was no appropriation for this account in fiscal year 1988. The national practitioner data bank was mandated by the Congress as part of the Health Care Quality Improvement Act of 1986, Public Law 99–660, to serve as a national source of information on malpractice judgments and settlements and various other disciplinary actions taken against physicians, dentists, and other categories of licensed health professionals. The $2,800,000 will help finance the capital costs of the first phase of a contract to establish the data bank. The Committee understands that additional capital costs will be needed in future years, for a total of approximately $13,200,000.

Buildings and facilities

The Committee recommends $1,000,000 for maintenance and repairs to facilities at the Gillis W. Long Hansen's Disease Center. This is $282,000 more than the 1988 appropriation and $600,000 more than the administration's request for 1989. This allowance will provide for necessary repairs and improvements, including correction of life safety code violations in the research facilities, that will ensure the continued safe and efficient operation of the center located in Carville, LA.

Program management and direct operations

The Committee has included $93,456,000 for the HRSA program management and direct operations activities for fiscal year 1989. This is an increase of $16,883,000 over the administration's request and $12,147,000 more than the fiscal year 1988 appropriation level.

The Committee has restored to HRSA those programs and operating resources that the administration's request omitted. As indicated in this report, the Committee has restored or added many program functions which the administration did not propose, and it is the Committee's expectation that the administration will fully utilize all the resources provided to conduct those functions.

The amount provided will support 1,415 full-time equivalent positions, exclusive of family planning. The amount recommended for family planning includes sufficient funds to support an additional 60 full-time equivalents. In calculating the amount required for HRSA program management, the Committee has reduced funding to reflect the Governmentwide cutback in travel proposed by the Congress.

The Committee directs the HRSA Office of Health Facilities to conduct a feasibility study for the construction of a Perinatal Center at the University of Mississippi Medical Center to be funded through the grant authority of Title VII of the Public Health Service Act. The center would provide the most advanced technology in treating critically ill and well babies and would be the regional focal point for both perinatal research and the training of medical personnel specializing in this field.

Working capital fund

Responsibility for requesting and justifying the Office of the Secretary's working capital fund was delegated to departmental agencies in fiscal year 1988. This fund supports headquarters and regional departmental activities which directly provide services on behalf of the agencies. The Committee has allowed $4,000,000 within the program management activity for the working capital fund, which is $528,000 less than the administration request and $460,000 more than the fiscal year 1988 amount.

Health education assistance loans [HEAL]

The Committee recommends a $325,000,000 loan guarantee ceiling for HEAL loans to health professions students in fiscal year 1989. This is $225,000,000 more than the administration's request and $20,000,000 more than the 1988 level. In addition, any unused portion of the fiscal year 1988 ceiling may be used for HEAL loan commitments and disbursements in fiscal year 1989. The Committee also directs that loan guarantee funds under the HEAL Program in fiscal year 1989 be available without regard to any apportionments or other administrative limitations not specifically authorized by statute.

This program provides a major source of non-Federal funds to thousands of health professions students pursuing health careers at relatively low costs to the Federal Government. Direct appropriations are necessary only if the student loan insurance funds (whose moneys are derived from insurance premiums charged to HEAL borrowers) are insufficient to make payments on defaulted loans. Since inception of this program in 1978, no direct appropriation of funds has been necessary.

Health care improvement funds

The bill does not include funds in fiscal year 1989 to begin a new program of research studies in the Health Resources and Services Administration to evaluate the effectiveness of various medical procedures or treatments. The President's budget requested $15,000,000 for these studies. This program resembles another program begun in fiscal year 1988 called patient outcome research. The Committee has included additional funds in the appropriations for the National Center for Health Services Research to expand this program rather than initiating an expensive and duplicative program at HRSA.

MEDICAL FACILITIES GUARANTEE AND LOAN FUND

1988 adjusted appropriation	$22,000,000
1989 appropriation request	21,600,000
House allowance	21,600,000
Committee recommendation	21,600,000

The Committee recommends $21,600,000 for the medical facilities guarantee and loan fund. This is the same as the administration's request and the House allowance, and $400,000 less than the 1988 level. These funds are used to comply with the obligation of the Federal Government to pay interest subsidies on federally guaranteed loans throughout the life of the loans. These loans were used for hospital modernization, construction, and conversion.

CENTERS FOR DISEASE CONTROL

DISEASE CONTROL, RESEARCH, AND TRAINING

1988 Appropriation	$820,376,000
1989 Appropriation request	923,865,000
House allowance	819,941,000
Committee recommendation	979,357,000

The Committee recommends an appropriation of $979,357,000 for the Centers for Disease Control [CDC], an increase of $55,492,000 over the administration's request, and $158,981,000 more than the fiscal year 1988 appropriation.

The Centers for Disease Control is the focal point within the Public Health Service for prevention application. By setting national objectives, conducting investigations, studies, surveillance, and training, and developing health promotion strategies, CDC seeks to improve the health and quality of life of the people in the United States.

To accomplish these objectives, CDC: identifies and defines preventable health problems and maintains active surveillance of diseases through epidemiologic and laboratory investigations and data collection, analysis, and distribution; serves as the PHS lead agency in developing and implementing operational research aimed at developing and testing effective disease prevention, control, and health promotion programs; responds to public health emergencies; operates a national program to address environmentally related health problems; administers a national program to develop recommended occupational safety and health standards, and to conduct research and technical assistance to assure safe and healthful working conditions for employees; develops and implements a program to sustain a strong national public health work force; and conducts a national program for improving the performance of clinical laboratories.

CDC is responsible for controlling the introduction and spread of infectious diseases and promoting more healthful lifestyles. This is done through service grants, applied research, and financial and technical assistance to States and localities. CDC provides consultation and assistance to other nations and international agencies to assist in improving their disease prevention and control, environmental health, and health promotion activities. CDC is centrally involved in the Public Health Service's efforts to monitor, understand, and prevent the further spread of acquired immunodeficiency syndrome [AIDS].

Preventive health and health services block grant

The Committee recommends $85,733,000 for the preventive health and health services block grant, which includes $450,000 to fund technical assistance and program operations. This amount is $74,000 more than the administration request and the same as the fiscal year 1988 amount. The House deferred action on this program. The preventive health and health services block grant is a key mechanism for supporting preventive health services. Other key mechanisms include direct program operations by Federal staff, cooperative agreements, and categorical grants for immunization and sexually transmitted diseases. The States have the flexibility to meet State priorities with these grant funds.

Prevention centers

The Committee recommendation includes $2,000,000, the same as the request, to continue funding the centers. The House deferred action on this program. The Committee disagrees with the administration that CDC should use these funds to provide for the phase out of the prevention centers over a 2-year period, and directs that these funds be used for only a 1-year period. Grants are made with academic health centers for the establishment, maintenance and operation of centers for research and demonstration with respect to health promotion and disease prevention. These centers undertake research and demonstration projects to promote health and disease prevention, improve methods of appraising health hazards and risk factors, and serve as demonstration sites for the use of new and innovative research in public health techniques to prevent chronic diseases. The Committee understands that CDC has announced for applications for one international health promotion and disease prevention center to be selected through peer review, as stated in the prevention center authorization.

Sexually transmitted diseases [STD]

For sexually transmitted diseases, the Committee recommends $70,947,000, which is $5,500,000 more than the administration request and $5,786,000 over the fiscal year 1988 amount. The House deferred action on this program. The recommendation includes $60,291,000 for STD grants and $10,656,000 for program operations.

During the last several years, the spectrum of sexually transmitted diseases has increased dramatically so that over 50 organisms and syndromes are now recognized in this category. In addition to the traditional diseases, the list of STD also encompasses chlamydia trachomatis infections, genital herpes, human papillomavirus, genital mycoplasmas, cytomegalovirus, hepatitis, vaginitis, enteric infections, ectoparasitic diseases, and the human immunodeficiency virus [HIV]. Most of these infections have long been known, but they have achieved recent prominence because new diagnostic approaches have facilitated epidemiologic investigations to describe their extent, method of transmission, and clinical consequences. The true incidence of STD appeared to have increased at an alarming rate, with a higher proportion of systemic diseases being sexually transmitted. Based on recent studies, the impact of STD on maternal and child health is now apparent. Those interested in improving general reproductive health realize that their programs must include activities to prevent and control STD.

To prevent STD cases and their subsequent complications, a partnership of Federal, State, and local governments, private medicine, and voluntary organizations is necessary. The Centers for Disease Control supports this partnership through direct financial assistance to State, local, and territorial health authorities; national disease surveillance; applied research efforts; and national STD leadership activities. Federal grants support disease monitoring, screening, and sexual partner referral services as well as other outreach efforts in all States. National disease surveillance is directed toward defining the extent and trend of the STD problem, and in identifying disease outbreaks that require program attention. Applied research efforts are directed toward further characterizing the pathophysiology, host response, epidemiology and behavioral aspects of these diseases to permit the development of improved diagnostic, prevention, and control methodologies. National leadership activities include: technical assistance in planning, developing, and implementing control programs; technical consultation in reviewing and monitoring control efforts; development of clinical standards and management systems; training; and epidemic assistance in disease outbreak settings.

The Committee was concerned to learn of the dramatic increases in sexually transmitted diseases in the United States during the past year. The Committee understands that many of these diseases have been associated with increased risk of acquiring and transmitting HIV infection, thus making the prevention and control of STD's an important element in the prevention of AIDS.

The Committee stresses again its intention that funds appropriated for AIDS are sufficient for that program area, and that no further diversion of funds or personnel from STD to AIDS should occur. Rather, it is important that STD control be supported and restored to address its important role in the effort to prevent AIDS.

The Committee is also aware of the role of STD in infertility in the United States. At least 20 percent of infertility is directly related to infection with an STD, and thus could be prevented by controlling STD. Gonorrhea and chlamydia are directly related to this problem. Although rates of gonorrhea have decreased, more than 4 million Americans each year acquire chlamydia. Because of the diversion of resources and the important demands of the AIDS epidemic, a national chlamydia control program has not been possible. The Committee intends that efforts be made to begin initiating such a program.

The Committee is aware that the STD national hotline has been providing a valuable service to the American public and is also aware that many Americans cannot get through on the phone to the hotline because of overwhelming demand for services. The Committee intends that appropriate funds be made available to allow the hotline to provide adequate services to Americans in need of referral. Particularly as more is known about the importance of STD's in the acquisition of AIDS, referral and information about these diseases is increasingly important.

The Committee is concerned that although the American public is being educated about the importance of AIDS and how to prevent HIV infection, public education programs about STD's are also necessary. CDC estimates that there are more than 13 million new cases of sexually transmitted diseases each year. The Committee intends that messages directed to the public about AIDS also include messages about the importance of preventing other sexually transmitted diseases.

The Committee is concerned over apparent disparities between the incidence of reported sexually transmitted diseases and the allocation of project funds. The Committee strongly recommends that one of the major factors for allocation of project grant funds for sexually transmitted diseases be based on the relative number of reported cases in each State.

Immunization

The Committee recommends $163,488,000 for immunization, which is $61,900,000 more than the administration request, $65,290,000 more than the fiscal year 1988 amount, and $46,400,000 more than the House allowance. Appropriate administration of safe and effective vaccines remains the most cost-effective method of preventing human suffering and reducing economic costs resulting from vaccine-preventable diseases. This Committee continues to be supportive of this most successful program. An article in the "American Journal of Health" reports that the benefit-cost ratio of rubella immunization given in combination with measles vaccine is estimated to be over 14 to 1.

The recommendation includes $148,137,000 for grants to vaccinate the same number of children as were vaccinated in 1987 and 1988 and includes, as the result of price changes, the new H influenzae b vaccine, which requires a three-dose series. The grant funds include $18,300,000 for State operations costs, $30,800,000 for the additional cost of the three-dose series of the H influenzae b vaccine, and $6,200,000 for patient/parent notification requirements.

In addition, the Committee recommends $8,251,000 for direct operations and $4,000,000 for the vaccine stockpile, for which there was no administration request. The recommendation also includes $3,100,000 for the coordinating office for the National Vaccine Program. Of this amount, $2,600,00 is included for the reporting of adverse events relating to vaccines.

The Food and Drug Administration recently licensed an improved vaccine to prevent cases of bacterial menigitis and other complications of H influenzae b infection (paralysis, loss of hearing, seizures, and mental retardation). The improved vaccine is preferable to the older vaccine because it specifically provides better protection of younger children. It is anticipated that the Food and Drug Administration [FDA] will approve the use of the new vaccine in children 6 months of age, for whom the disease is more frequent and more serious. In providing funding for the cost of the three-dose series of the new vaccine, the Committee recommends the routine use of the new vaccine in public clinics.

In view of persistent low levels of immunization in certain areas as well as the rising costs of some vaccines, it is imperative that the Centers for Disease Control administer the childhood immunization program in a manner which ensures the most effective use of limited resources. Accordingly, the Committee believes that the immunization program's resources should be focused to the extent possible on low-income urban and rural areas where immunization rates may be expected to be lower.

The Committee is concerned that, over the years, the historical focus of the immunization program on low-income children may have been lost as public sector vaccines are distributed more widely. While the Committee endorses the notion of widespread immunization, the Committee urges the CDC not to lose sight of the immunization program's principle concern, which is to provide vaccines at no charge to those most in need of them. In administering the childhood immunization program, the Centers for Disease Control should take care that these vaccines are provided without charge as required by law and are distributed primarily, through public health clinics and otherwise, to those who are most likely to benefit from free public immunizations.

Infectious diseases

For infectious diseases, the Committee recommends an appropriation of $41,958,000, the same as the request and the House allowance, and $4,893,000 more than the fiscal year 1988 level of funding. Included in the increase is $4,500,000 to upgrade the CDC mainframe computer.

CDC's infectious disease prevention is focused on: research to develop new or improved diagnosis, prevention and control techniques; working with States and local health departments and private health care providers to transfer and accelerate the general application of accepted prevention technologies; and maintaining a capability to respond to outbreaks of many diseases that seldom occur.

Acquired immunodeficiency syndrome [AIDS]

The Committee recommendation includes $384,419,000 for AIDS activities, which is $16,300,000 less than the administration request, $23,800,000 less than the House allowance, and $79,477,000 over the fiscal year 1988 amount.

In 1987, over 20,000 new cases of AIDS were reported, a 56-percent increase over 1986. In total, over 60,000 AIDS cases and more than 34,000 AIDS-related deaths in the United States have been reported to the Centers for Disease Control [CDC] since June 1981. Each of the 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, and the Trust Territories have reported cases of AIDS. In 1985, AIDS became the 11th leading cause of potential years of life lost before the age of 65, and in 1986 is expected to be 8th. As many as 1.5 million other Americans may be infected with the AIDS virus already. Extraordinary progress has been made in a relatively short period of time in understanding this new and devastating disease.

In order to increase public awareness of AIDS and how it can be prevented, CDC has initiated an intensive national public information campaign that includes school health programs, support of State and local prevention programs (including counseling, testing, and partner notification), training of health care workers, and special minority initiatives. A general brochure which provides facts about AIDS in a manner easily understood by the general public was mailed this year to every household in the country. Additionally, over 13.3 million copies of the October 1986 Surgeon General's Report on AIDS have been distributed. Public service announcements about AIDS transmission also have been developed and aired on local and national television and radio.

CDC will also expand its efforts begun in 1988, to determine more accurately the current nationwide prevalence of HIV infection, and to predict better its future occurrence. Consistent with traditional public health practices, it is important to have accurate data on baseline rates of HIV infection. This information is needed by cities, States, and the Federal Government for developing policies and planning future actions for targeting prevention resources to populations in greatest need, accommodating health service needs, directing research to behavioral change and prevention, and evaluating the effectiveness of AIDS prevention and control programs.

The Committee recommendation includes $59,173,000 for the family of surveys. Within that amount, an additional $5,700,000 is included to expand the newborn HIV seroprevalence component. These additional funds will expand the survey to all 50 States and territories, so that the least biased estimation of HIV infection in the female half of the general population can be used to estimate overall population trends of the epidemic. In addition, the Committee did not provide $22,000,000 for the national household seroprevalence survey, as requested by the administration. Witnesses testifying before the Committee questioned the value of such a survey.

This study will consist of a series of special surveys and sentinel surveillance of selected populations. To provide continuing information to identify future trends, special ongoing surveys of blood samples of military recruits, blood donors, Job Corps applicants, State prisoners, college students, cohorts of homosexual men, newborns, clinical specimens from private physicians' offices, and emergency room personnel will be expanded. Also, sentinel surveillance systems in 30 metropolitan areas covering hospitals, clinics for STD and tuberculosis control, drug abuse treatment centers, and women's health clinics, will be established. Current plans would obtain confidential or anonymous data from the testing of about 10 million individuals annually through these surveys.

The recommendation includes $78,460,000 for the Centers surveillance activities, to continue and improve our knowledge about cases and deaths from AIDS, and the number and spread of HIV infections.

The recommendation includes $44,590,000 for epidemiology/laboratory studies to determine the natural history of the infection and to gain more knowledge about the mode of HIV transmission, and to develop and evaluate blood tests.

The Committee's recommendations include $261,369,000 for CDC's information/education activities. Of this amount: $36,040,000 is to provide information/education to the general public, including $7,000,000 to organizations such as the American Red Cross; $36,450,000 is for information/ education for school and college-aged youth; $184,800,000 is for persons at increased risk of AIDS, including $102,376,000 for State and local counseling, testing, and partner referral activities, and $6,300,000 is for activities for the hemophilia project; and $4,079,000 is for the training of health workers.

It is recognized that the primary value of HIV testing is the counseling about prevention and behavior change that accompanies it. The Committee is concerned that the increases in funding provided for HIV testing programs have a sufficient balance between counseling and testing. In granting funds, the CDC should make clear that the more costly part of this effort is the counseling and that, therefore, a majority of the funds should support counseling services.

An increasing number of federally funded health providers are routinely offering HIV antibody testing and counseling. A percentage of the counseling and testing funds made available in this appropriation should be permitted to supplant ongoing levels of AIDS counseling and testing activities in these programs (for example, STD clinics, family planning clinics, et cetera) so these services can be offered without sacrificing the other health care services these programs are intended to provide.

The Committee notes with growing concern the continued disproportionate and growing incidence of HIV infection among Hispanics and blacks. A much greater effort is needed to provide education and prevention activities targeted at minority populations. It is important to enlist local minority organizations into the prevention effort, complementing the activities and services being provided by official health agencies. The Committee recommendation includes $30,156,000. Of this amount, $5,000,000 is provided for direct assistance to national minority organizations and community-based organizations working with minorities in 15 to 20 of the metropolitan areas having the highest incidence of AIDS among minority populations. The Committee urges cooperation in these activities between the CDC and the Office of Minority Health, in recognition of the special expertise of the Office of Minority Health in working with these populations.

Community-based organizations have been an important part of the Nation's response to the AIDS epidemic, particularly in those metropolitan areas with the highest incidence of AIDS. These organizations can be more effectively used to carry out prevention activities at the community level that are directed toward individuals who are practicing risky behaviors. The Committee recommendation includes $28,492,000 for State and local health education/risk reduction activities. Of this amount, $5,000,000 is provided for direct support to 15 to 20 community-based organizations in metropolitan areas having the highest incidence of AIDS to carry out information, education and risk reduction activities directed toward persons at high risk of HIV infection. The Committee recommends that the Centers for Disease Control require that education funds passed through State and local health agencies be passed on to community-based organizations as well.

The Committee commends the CDC for its efforts in developing guidelines for AIDS education programs for school-aged children. The Committee believes that programs aimed at educating our children are an essential part of any comprehensive AIDS efforts and directs the CDC to continue its efforts in this area.

The Committee is deeply concerned with the impact of HIV/AIDS among children and adults with hemophilia, with the number of cases more than doubling since last year. Further, an estimated 10 to 20 percent of the spouses of persons with hemophilia are HIV positive. The Committee remains very supportive of the collaborative CDC Maternal and Child Health [MCH] Program, involving the national hemophilia organization, working in concert with its regional treatment centers network. The Committee understands that this program has shown very productive results in AIDS education and psychosocial support for persons with hemophilia and their families.

A new and growing area of concern to the Committee is the relationship between the HIV infection and tuberculosis [TB]. The HIV infection can activate TB in those who previously only carried the tubercle bacillus. This, with other factors, has caused the TB incidence to increase significantly in those areas of the country with the highest levels of HIV infection, particularly in large metropolitan areas. Since TB is highly contagious, TB rates must be reversed again to continue the downward trends that have been witnessed in the past several decades. The Committee recommends that $6,000,000 be utilized to address this problem with increased outreach activites, and research and demonstration programs to study the best methods of controlling this situation. The Committee recommends that CDC collaborate closely with NIH in this effort

The Committee is aware that during 1987 the national AIDS hotline responded to over 1 million calls from Americans seeking information and referral from this 24-hour-a-day toll-free service. The hotline expects to respond to well over 2 million calls in 1988. Increased publicity of the phone number through the mass media campaign, public education programs and the national mail campaign can be expected to dramatically increase the number of calls to the hotline in fiscal year 1989. The Committee is also aware that evaluation of the hotline by the Public Health Foundation has found that the quality of service has been consistently excellent. The Committee intends that sufficient funds, equipment and personnel be provided to allow for increased demand for services, a separate Spanish-speaking hotline, as well as service for the hearing-impaired.

The Committee has provided an additional 91 FTE's for CDC's AIDS prevention and control efforts. This is a sufficient number to make unnecessary the borrowing of positions from other CDC programs. The Committee notes that in previous years, the CDC has diverted personnel and resources from STD control programs to AIDS activities. The Committee is especially concerned about maintaining STD programs because of the correlation between STD levels and incidence of HIV infection, as well as growing evidence that some STD's may be a cofactor in the development of AIDS. The Committee requests an accounting from the CDC of personnel and resources used for AIDS and STD's to assure the Committee that personnel slots assigned to STD's are not being diverted, formally or informally, to AIDS work.

The Committee directs the Centers for Disease Control to enter into direct cooperative agreements with local public health agencies for comprehensive AIDS prevention projects if 2,000 cases have been reported by an SMSA by June 1, 1988.

Tuberculosis grants

The Committee recommends $6,702,000 for the Tuberculosis [TB] Control Grant Program, the same as the request, the House allowance, and the fiscal year 1988 level of funding. These funds are used to provide funds to State and local health agencies in high incidence areas for direct TB control activities. The Committee is concerned that the burden for TB is increasingly being borne by minorities and the foreign born.

For the first time since national reporting began in 1953, there has been an increase in indigenous tuberculosis cases. The United States had been experiencing a 6.7-percent annual decline in cases due, in large part, to improved treatment and public health control strategies. This decline slowed to 0.2 percent in 1985 and increased 2.6 percent in 1986. From 1985 through 1987, over 67,000 cases were reported—about 10,000 more cases than expected, based on historical trends.

New authorizing legislation provides up to 10 percent of these funds to be utilized for research and demonstration programs on developing better methods of diagnosis, treatment and control of TB. The Committee supports this new initiative and recommends development of initiatives in these areas.

Chronic and environmental disease prevention

This bill includes $43,415,000 for chronic and environmental disease prevention, which is the same as the request, $23,064,000 less than the House allowance, and $257,000 more than the fiscal year 1988 funding level.

Significant premature death and avoidable illness and disability are caused by exposure to man-made and naturally occurring environmental hazards, nonoccupational injuries and by personal behavior. Chronic diseases represented at least 67 percent of the causes of death in 1984 and injuries accounted for at least 30 of the years of potential life lost before age 65 in that same year. Prevention of the occurrence and progression of such diseases is based on: reducing or eliminating exposures to hazards; detecting disease early to avoid complications; reducing, or eliminating, behavioral risk factors; and increasing the prevalence of health promoting practices.

The recommendation includes $479,000 for chronic disease control, $1,436,000 for injury control, $3,830,000 for prevention of disabilities, $407,000 for chronic fatigue syndrome, $2,393,000 for Diabetes Translation Center, and $4,920,000 for the diabetes State grant program.

The Committee directs the Centers for Disease Control to establish an injury control advisory committee to provide guidance to CDC in strategic planning, determining priorities, ensuring an appropriate mix of efforts, and recommending measures to correct potential imbalances in CDC's Injury Control Program. The advisory committee shall be comprised of persons representing the major elements or disciplines in injury control.

The Committee remains concerned that CDC has not yet issued standards or guidelines for hospital risk hazards. These standards are the result of a 1982 CDC task force and the Committee feels that they would be very useful to the hospital community, for example, in dealing with issues surrounding the treatment of AIDS patients, excessive radiation, et cetra. The Committee further urges that nursing expertise be involved in finalizing the standards.

The Committee notes that on June 1, 1975, the Assistant Secretary for Health directed that a strong, continuing dental disease prevention program be established within the Centers for Disease Control. Consequently, the dental disease prevention activity [DDPA] was established on July 15, 1975. The DDPA's functions addressed a wide range of professional concerns around issues of the organization, delivery, and monitoring of dental disease prevention practices in the Nation. Its mission was to provide leadership toward the goal "that every person in the Nation can keep his teeth for life."

The DDPA has provided national leadership and professional expertise in community water fluoridation, the single most effective preventive oral health measure in the Nation's history. The DDPA has conducted monitoring and surveillance of a broad range of dental disease prevention activities, including the AIDS virus. DDPA's studies have focused on the prevalence of HIV virus in dental health care workers exposed to AIDS from needlesticks or sharp instrument injuries, and on the significance of oral conditions which may provide evidence of infection with AIDS virus.

Chronic fatigue syndrome

The Committee is pleased that the CDC has developed a working clinical definition and a new formal name, chronic fatigue syndrome [CFS], for the disease which had been know as chronic Epstein-Barr virus syndrome [CEBV]. The CDC descibes this symptom complex as a syndrome of unknown etiology, characterized primarily by chronic or recurrent debilitating fatigue combined with various other symptoms. The Committee notes that the surveillance network for CFS is underway and that the studies will require the commitment of trained medical personnel to educate physicians about the diagnosis of CFS and to confirm suspected cases.

The Committee urges the CDC to expand its studies on the possible link between CFS and the newly discovered human herpesvirus-6 (HHV–6), and the other CFS studies which are underway. The true public health burden of this emerging disease is not now known and the public continues to express concern about its diagnosis, causes, and treatment. The Committee suggests that the CDC continue its attempts to detect persistent virus infections in the CFS patients and to develop appropriate controls.

The Committee also notes that CFS was first identified around Lake Tahoe, NV, and has spread to surrounding communities in northern Nevada. The Committee directs CDC to expand its surveillance network to the State of Nevada as a site for further study of the disease.

Occupational safety and health

The Committee recommends $71,210,000 for occupational safety and health activities, $4,318,000 above the request, $1,200,000 more than the House, and $1,542,000 more than the fiscal year 1988 appropriation.

The objective of this activity is to prevent work-related hazards for 104 million U.S. workers. According to the Department of Labor's Bureau of Labor Statistics [BLS], about 1 out of every 10 workers in private industry suffers an occupational injury annually; about 4 out of 100 workers are disabled from these injuries; and approximately 9 workers in 100,000 are killed on the job each year. The program is designed to conduct research, recommend criteria for standards, and respond to requests of workers, employers, and government agencies for health hazard evaluations in an effort to prevent premature mortality, reduce unnecessary morbidity, and improve the quality of the Nations' workplaces.

The Committee recommendation includes an increase of $3,118,000 to maintain funding for training at the fiscal year 1988 level, $500,000 for the continued support for the establishment of an industrial medical center to provide training of health personnel to deal with occupational disease, and $700,000 for the Division of Respiratory Disease Research to continue research activities begun last year.

Health statistics

The Committee recommends $48,938,000 for health statistics, the same as the request, the House allowance, and $334,000 more than the fiscal year 1988 level of funding. The Committee approves the use of $12,486,000 from 1 percent evaluation funds for health statistics activities.

Through its national surveys and data systems, the National Center for Health Statistics [NCHS] provides data to identify health problems, monitor progress in meeting objectives, and highlight relationships between risk factors and disease. This data serves as the foundation of the Nation's public health efforts. Public health officials and researchers in CDC, the Department, State/local governments, and the private sector rely heavily on NCHS data. NCHS statistical data serves as a national resource.

Epidemic services

For epidemic services, the Committee recommends $55,452,000, the same as the request and the House allowance, and $1,203,000 more than the fiscal year 1988 appropriation.

The early recognition of adverse health conditions and the rapid application of prevention and control measures are fundamental to CDC's contribution to protecting the health of the American people. Bringing epidemic situations to rapid and successful conclusions prevents costly morbidity and mortality. Surveillance, epidemiology, and laboratory activities support this CDC-wide response capability.

The objectives of the epidemic services activity are to: (1) provide for the prevention and control of epidemics; (2) maintain surveillance systems, analyze data, and respond to public health problems when indicated; (3) develop public health epidemiologists; and (4) carry out the quarantine program as required by regulations.

Building and facilities

The Committee recommends $2,000,000 for buildings and facilities, the same as the request and the House allowance, and $85,000 more than in fiscal year 1988. The funds are for general repair and improvement projects of the Centers.

The Committee has included corrected bill language for the construction of a laboratory facility at Chamblee, GA, and an office building at the Centers for Disease Control Clifton Road site.

Program management

For program management, the Committee recommends $3,095,000, the same as the request and House allowance, and $29,000 more than the fiscal year 1988 level. This activity provides for the overall management of the programs and activities of CDC.

The Committee is concerned with the CDC establishment of a vessel sanitation program advisory committee whose membership will exceed the scope of vessels' sanitation issues. If such a committee is to be established, the Committee directs that its membership should be limited to the CDC, the cruise industry and inspection authorities.

State assignee ceiling exempt provision

The Committee has again included bill language to exempt employees of the Public Health Service, detailed as field assignees, from full-time equivalent [FTE] employment limitation, administrative ceiling, or targets. Testimony has indicated the value of this provision in implementing the expanding AIDS and STD programs.

FULL-TIME EQUIVALENTS [FTE'S]

For fiscal year 1989, the Committee intends that CDC maintain a minimum full-time equivalent employment level of 4,712, including a minimum of 523 for AIDS activities, to effectively carry out the growing AIDS responsibilities.

NATIONAL INSTITUTES OF HEALTH

1988 comparable appropriation	$6,666,693,000
1989 appropriation request	7,122,837,000
House allowance	6,862,495,000
Committee recommendation	7,199,298,000

The Committee recommends an appropriation of $7,199,298,000 for the National Institutes of Health [NIH]. This is $76,461,000 more than the administration request and $532,605,000 more than the 1988 appropriation. The House allowance for NIH is $6,862,495,000 which is less than recommended by the Committee. The House figures do not, however, include $320,742,000 of unauthorized items. These figures are shown in the table that follows:

[In thousands of dollars]

	Fiscal year—		House bill	Committee recommendation	Recommendation compared with—		
	1988 actual	1989 request			Fiscal year 1988	Fiscal year 1989	House bill
NATIONAL INSTITUTES OF HEALTH							
National Cancer Institute	1,469,327	1,593,536	1,489,897	1,591,036	121,709	(2,500)	101,139
National Heart, Lung, and Blood Institute	965,536	1,054,503	1,018,983	1,056,003	90,467	1,500	37,020
National Institute of Dental Research	126,297	130,683	127,315	132,578	6,281	1,895	5,263
National Institute of Diabetes and Digestive and Kidney Diseases	534,733	565,908	546,902	565,908	31,175	....	19,006
National Institute of Neurological and Communicative Disorders and Stroke	534,692	570,978	557,046	477,878	(56,814)	(93,100)	(79,168)
National Institute on Deafness and Other Communication Disorders	....	....	....	96,100	96,100	96,100	96,100
National Institute of Allergy and Infectious Diseases	638,800	745,352	732,453	758,352	119,552	13,000	25,899
National Institute of General Medical Sciences	632,676	687,828	623,087	690,653	57,977	2,825	67,566
National Institute of Child Health and Human Development	396,811	418,388	407,650	431,388	34,577	13,000	23,738
National Eye Institute	224,947	233,968	228,235	234,218	9,271	250	5,983
National Institute of Environmental Sciences	215,666	223,168	216,985	223,168	7,502	....	6,183
National Institute on Aging	194,746	205,222	202,096	225,578	30,832	20,356	23,482
National Institute of Arthritis and Musculoskeletal and Skin Diseases	147,679	158,931	156,174	161,931	14,252	3,000	5,757
Research resources	368,153	357,987	355,767	367,987	(166)	10,000	12,220
National Center for Nursing Research	23,380	25,107	27,417	28,107	4,727	3,000	690
John E. Fogarty International Center	15,651	16,074	16,074	16,474	823	400	400
National Library of Medicine	67,910	70,626	64,836	70,626	2,716	....	5,790
Office of the Director	61,819	59,578	71,578	65,578	3,759	6,000	(6,000)
Buildings and facilities	47,870	5,000	20,000	12,500	(35,370)	7,500	(7,500)
Procurement reform	....	....	....	(6,765)	(6,765)	(6,765)	(6,765)
Total	6,666,693	7,122,837	6,862,495	7,199,298	532,605	76,461	336,803

Note: Numbers in parenthesis ( ) are negative.

Acquired immunodeficiency syndrome [AIDS]

The Committee has provided $618,630,000 for the AIDS related activities of the National Institutes of Health. This is $31,000,000 more than the President's request and $150,824,000 more than provided in fiscal year 1988. The administration requested that all AIDS funding be provided in one centralized account in the Office of the Assistant Secretary. The Committee has rejected this request. The figures are shown in the table that follows:

[In thousands of dollars]

AIDS	Fiscal year— 1988 actual	Fiscal year— 1989 request	House bill	Committee recommendation	Recommendation compared with— Fiscal year 1988	Recommendation compared with— Fiscal year 1989	Recommendation compared with— House bill
NATIONAL INSTITUTES OF HEALTH							
National Cancer Institute	89,944	125,280	125,280	125,280	35,336		
National Heart, Lung, and Blood Institute	24,738	39,032	39,032	39,032	14,294		
National Institute of Dental Research	3,169	3,526	3,526	3,526	357		
National Institute of Diabetes and Digestive and Kidney Diseases	3,351	3,650	3,650	3,650	299		
National Institute of Neurological and Communicative Disorders and Stroke	12,212	13,393	13,393	13,393	1,181		
National Institute of Allergy and Infectious Diseases	223,728	310,268	310,268	323,268	99,540	13,000	13,000
National Institute of General Medical Sciences	2,394	11,100	11,100	11,100	8,706		
National Institute of Child Health and Human Development	14,292	20,443	20,443	22,443	8,151	2,000	2,000
National Eye Institute	3,830	4,947	4,947	4,947	1,117		
National Institute of Environmental Sciences	3,917	4,234	4,234	4,234	317		
National Institute on Aging	361	452	452	452	91		
National Institute of Arthritis and Musculoskeletal and Skin Diseases	660	687	687	687	27		
Research resources	50,418	38,010	38,010	43,010	(7,408)	5,000	5,000
National Center for Nursing Research	510	707	707	707	197		
John E. Fogarty International Center	4,500	4,736	4,736	4,736	236		
Office of the Director	10,632	7,165	7,165	13,165	2,533	6,000	6,000
Buildings and facilities	19,150			5,000	(14,150)	5,000	5,000
Total	467,806	587,630	587,630	618,630	150,824	31,000	31,000

A significant advance in understanding the disease process in AIDS includes the precise delineation of the nature of the mechanisms whereby the human immunodeficiency virus binds to and destroys cells of the immune system. For some time it was known that the T4 lymphocyte, which is the critical inducer cell of the immune system responsible for regulating all the other components of the system, was the major target of HIV. Recently it was discovered that monocyte-macrophages, the scavenger cells of the immune system, can also be infected by the virus but not destroyed. The monocyte-macrophage thus serves as the major reservoir of the virus and can actually spread the virus to different parts of the body. This finding has presented an additional hurdle in the search for therapeutic agents that can eradicate the virus.

The discovery and development of new drugs to treat and vaccines to prevent AIDS are of high priority to NIH. The first AIDS vaccine trials are underway—evaluating the safety and immunogenicity of the vaccine in small numbers of volunteers. This preparation consists of a protein of the AIDS virus engineered by NIAID scientists using recombinant DNA technology. The NIH Clinical Center and the NIAID-supported vaccine evaluation units are testing this vaccine. It is anticipated that other candidate AIDS vaccines will enter clinical trials in the near future.

The Committee has added $31,000,000 above the administration request for AIDS activities at NIH. $10,000,000 of this is for AIDS infrastructure equally divided between intramural and extramural needs. With regard to the extramural program the funds are to be spent in a manner consistent with title I of S. 2222 as reported to the Senate on March 29, 1988. The Committee has also added $6,000,000 for an FTE enhancement of at least 200 AIDS-associated positions for NIH and related activities.

The Committee considers clinical trials for AIDS therapies to be the highest priority for NIH AIDS activities. Clinical trials are the best hope we can offer people affected by HIV. The Committee has therefore added $13,000,000 to expand ongoing clinical trials. Of this, $6,000,000 is intended to be targeted for general trials and $7,000,000 for pediatric trials. The Committee is particularly interested in early interventions for people with HIV infection. We request that the NIH AIDS coordinator report to the Committee on a semiannual basis regarding progress in expanding the number of drugs in trials and the number of participants in trials, as well as any unforeseen increase in resource needs. The first such report is due to the Committee on February 10, 1989.

The Committee urges NIH to take all necessary steps to achieve full operation of the planned 26-bed unit in the Clinical Center for the evaluation of AIDS treatments developed in the NCI and NIAID drug development programs, or elsewhere. There are currently only eight beds available for this purpose, and extensive building renovations are still needed. These pilot studies are critical because they answer in a short period of time the preliminary questions that can delay full-scale clinical trials for a year or more. The opening of this unit should not result in the reduction of beds or services anywhere at NIH for AIDS or any other disease.

The Committee also encourages greater diversity and accessibility of clinical trials and experimental therapies and requests that NIH and ADAMHA take every practical opportunity to consult, in the design of AIDS research protocols, with community-based organizations.

NIH staffing

The Committee continues to be very concerned about the reduction in full-time equivalent staff positions [FTE's] below the levels cited in report language. Therefore, for the third year in a row, the Committee has included bill language specifying a minimum range of FTE's to be allocated for the dollars appropriated for the programs and agencies in HHS.

The Committee was particularly alarmed to learn that a lack of staff has delayed AIDS drug clinical trials. To ensure appropriate staffing levels for these trials and other AIDS-related activities, the Committee has specified a separate FTE number for AIDS-related activities. Included in the AIDS-related FTE number is an increase of 200 positions for AIDS research conducted at the National Institutes of Health.

Funding priorities

The Committee continues to give the highest priority to the support of investigator-initiated research project grants and requests that the Director balance the competing goals of maintaining the highest possible number of grants with the interest of limiting the amount of downward negotiations.

Beyond expressing its specific directions with respect to numbers of grants and policies on downward negotiations, the Committee has attempted to minimize its directions to the Institutes regarding the specific allocations related to individual diseases or research mechanisms. It is the Committee's view that these decisions are best made by the scientists and the science managers at NIH based on the quality of the opportunities as they present themselves during the year. Based on the testimony of the NIH Director, however, the Committee believes that the amount recommended is sufficient to support approximately 11,600 research trainees and to provide for approximately 580 research centers. Furthermore, the Committee expects approximately $56,800,000 to be available for the Biomedical Research Support Program and that approximately $109,800,000 will be available for the General Clinical Research Centers Program and that approximately $28,000,000 will be available for major new clinical trials.

Gene mapping

The Committee has approved the NIH request for $28,000,000 for the gene mapping program in fiscal year 1989, an increase of $10,500,000 or 60 percent over the $17,500,000 provided in fiscal year 1988. A NIH-sponsored conference earlier this year suggested that this amount should increase each year up to $200,000,000 a year for 15 years for a $3,000,000,000 effort. In some quarters this effort has been hailed as the Manhattan project of the life sciences.

Gene maps that scientists are just beginning to construct could become one of the most important scientific tools ever created. The many, and varied, efforts underway to advance gene mapping, and America's ability to take advantage of the research, have created complex issues that the scientific community, industry, Congress, and our society at large must sort out.

In order to address these issues and also to insure that the Federal effort is coordinated the NIH is directed to establish a Human Genome Advisory Panel.

The Committee feels strongly that the Advisory Panel on the Human Genome should be appointed as quickly as possible. Recent reports from the Office of Technology Assessment and the National Research Council strongly support the development of genetic and physical maps of the full human genome, leading to the complete sequencing of the genome. Those reports point out the extensive activities in this area on the part of the National Institutes of Health, the Department of Energy, the National Science Foundation and other agencies. The Advisory Panel shall consist of the Director of the National Institutes of Health, the Secretary of Energy, the Director of the National Science Foundation and the Director of the National Library of Medicine, or their designees, along with four individuals representing the biotechnology industry, four individuals representing the research community, one individual with expertise in biomedical ethics and one individual representing national foundations, medical institutes and other philanthropic organizations involved in biomedical research. The Panel shall be cochaired by the representatives of the NIH and the Department of Energy. While a single lead agency would be ideal, the Committee recognizes the considerable current funding and commitment to achieve a map and sequence of the human genome on the part of both the Department of Energy and the National Institutes of Health. The cochair arrangement will draw upon the unique expertise and resources of the national laboratories supported by the Department of Energy, and the strength of peer-review biomedical research projects supported by the National Institutes of Health.

The Committee has noted the recent creation of the Office of Human Genome Research within the NIH Director's office. The Committee has included $28,000,000 for enhanced human genome research in appropriations for fiscal year 1989. The Committee is concerned, however, that genome research being conducted by various agencies be carefully coordinated so as not to waste scarce resources or detract from other research goals.

The Committee, therefore, expects the Advisory Panel to report within 18 months after enactment of this appropriations measure the optimal strategy for the mapping and sequencing of the human genome. It expects that the Advisory Panel will coordinate the activities currently underway by Federal agencies. The Committee strongly encourages the Panel to carefully consider how best to provide resources for this project, and how best to assure U.S. competitiveness in achieving this goal.

Florida demonstration project on research productivity

Last year the Committee encouraged progress under the Florida Demonstration Project on Research Productivity and requested the Deputy Director of NIH, in his capacity as Chairman of an Interagency Assessment Committee to keep the Committee apprised of executive branch actions to expand the project.

The demonstration is a joint effort by the Florida State system of higher education, the private institution of the University of Miami, and five Federal agencies to reduce unnecessary paperwork and administrative requirements in federally sponsored research. The five agencies are the National Institutes of Health, National Science Foundation, Department of Energy, Department of Agriculture, and Office of Naval Research. The project formally began in March of 1986. Hearings held in April 1987 showed the project to be having measurable success in providing scientists more time to spend on science and less on administrative tasks while accountability for funds was maintained.

In March 1988, the Presidential Task Force on Regulatory Relief approved the expansion of the Project, beginning October 1, 1988, to include research contracts as well as grants, and to include universities and research facilities outside of Florida.

In January 1988, the Interagency Assessment Committee reported to the Office of Management and Budget [OMB] and recommended national expansion of successful elements of the Demonstration as well as continued demonstration of new elements.

On May 18, a Memorandum to the Heads of Executive Departments (M–88–20) was issued by OMB implementing the recommendations of the Interagency Assessment Committee. The Interagency Committee, chaired by the Deputy Director of NIH, will continue to oversee the project. All agencies which sponsor research are authorized to: waive most prior approvals, authorize grantees to incur preaward costs at their own risk, initiate one-time no-cost extensions of up to 12 months, and carry forward unobligated balances to subsequent funding periods without prior agency approval.

Agencies will report to OMB by January 1, 1989, on their experiences.

The five agencies and others are to continue demonstration aspects of the project under a phase II. The currently engaged Florida schools and five institutions which participated in ancilliary cost studies, University of California, Columbia University, Johns Hopkins University, State University of New York, and the University of Virginia, are automatically eligible for participation in phase II. An additional 10 to 15 schools will be selected on a nationally competitive basis. Proposals are due by July 1 and evaluation and selection by the Interagency Assessment Committee will be completed by September 1, 1988.

The Committee wishes to again compliment the leadership of NIH, the other agencies and the Florida schools for the progress made to enhance research productivity in this demonstration. The national exapansion and continued experimentation is applauded. Efforts to achieve greater scientific results for each dollar of federally sponsored research is a national priority.

The Committee directs the Chairman of the Interagency Assessment Committee to report to the Committee by November 15, 1988, on: (1) which schools were selected for phase II; (2) what elements were chosen for further demonstration; (3) what progress has been made by the agencies in implementing national expansion of the successful elements of the Florida demonstration; and (4) whether any statutory changes are needed to advance the objectives of research productivity.

As the expansion and continued demonstration moves forward, the Committee wishes to highlight an area of particular interest. This Committee and the Congress have focused attention on how to improve the use of money appropriated for aids research. Within the Florida demonstration the authorization to incur preaward costs by the Universities at their own risk if awards are not made has shown promising results while maintaining fiscal accountability. The Committee believes the NIH and other agencies engaged in AIDS research could take advantage of the national expansion of this authorization to increase the speed and progress in which Federal funds are used for AIDS research. While this same technique holds promise for other areas of research as well, AIDS research is of critical importance at this point in our national experience.

Scientific fraud

The Committee is concerned with the increasing allegations about scientific fraud in programs and projects supported with NIH funds. The Committee is pleased that the NIH has moved quickly to respond with the development of guidelines and regulations on scientific fraud and by commissioning an Institute of Medicine [IOM] study on the subject.

The IOM study will highlight priorities among publication practices, peer review, data retention, training, and supervisory practices and other topics which need to be addressed to assure quality in research. The study will also identify mechanisms for future exploration of selected topics, and will recommend how the National Institutes of Health and the general community of scientists, science editors, professional societies, academic institutions, and others can promote the proper conduct of research and discourage misconduct in science.

The Committee also expects NIH to strengthen its internal investigative responsibilities and fully explore the possibility of requiring the many peer review panels that evaluate research proposals to also on a random basis evaluate the results of that NIH-sponsored research with a focus on the broad area of scientific misconduct.

The Committee directs that a report detailing the NIH-proposed remedial steps be prepared and submitted to the Committee by February 1, 1989.

Diagnostic imaging

The Committee is aware that promising new imaging technologies are helping scientists and physicians better understand the causes of cancer, heart disease, Alzheimer's disease, and many other diseases and disorders. As such, the contributions of this field cut across most of the NIH Institutes. Therefore, in recognition of the importance of this field the Committeee requests that NIH, if concurred in by the Director of NIH, create a Diagnostic Radiology Coordinating Committee which will be responsible for coordinating on-going research, as well as to develop an NIH-wide long-range research plan for diagnostic radiology. The Committee requests that it be advised as to the disposition of this matter by February 1, 1988.

National Biotechnology Policy Board

The NIH is directed to establish a National Biotechnology Policy Board which should include representatives from all Federal agencies funding or promoting biotechnology-related research or regulation (including the National Institutes of Health, the National Science Foundation, the Department of Agriculture, the Department of Commerce, the Department of Defense, the Department of Energy, the Food and Drug Administration and the Environmental Protection Agency). Representatives of the Office of Management and Budget and the Office of Science and Technology Policy should be ex-officio members of the Board. Four individuals representing the university research community should be appointed, based on recommendations from the National Academy of Sciences. A biomedical ethicist and a representative of national foundations, medical institutes or other philanthropic organizations should also be appointed based on National Academy of Sciences recommendations. Four representatives of the U.S. biotechnology industry should be appointed following consultation with relevant industry groups. Two representatives of State biotechnology development programs should also be appointed. Members of the board are to elect a chairman from their members to serve for a 2-year period, and who may be reelected by the Board at its discretion.

The Committee expects the Board to review and appraise the programs and activities of the Federal Government relating to biotechnology, including the amount and type of biotechnology-related research. It should also review and appraise nonconfidential, privately funded biotechnology activities, including both basic and applied research, and the development of commercial biotechnology-related industries and products. The Board shall make recommendations to the President and to Congress on policies:

To enhance basic and applied research.

To enhance the competitiveness of the United States in development commercial biotechnology-related industries and products.

To assure the training of sufficient scientists, engineers and laboratory personnel for both research and commercial development.

To enhance the transfer of technology from university and Federal research laboratories to commercial laboratories.

The Board shall also make recommendations regarding:

Federal participation in cooperative research initiatives involving governmental and private entities.

Regulatory policies which affect biotechnology industries and products, ensuring that the regulatory system protects the public health, safety and environment without unduly impeding academic and commercial activities.

The board may establish advisory panels as it deems appropriate and would coordinate its activities with other relevant boards and commissions.

The Committee directs the reprogramming of necessary funds for activities of the board and Advisory Panel on the Human Genome in fiscal year 1989, which may be used to hire an executive director and other personnel as needed. The board should provide its first report to the President and to Congress no later than January 31, 1990, and every 2 years thereafter, with additional reports provided as the Board deems necessary or as requested by the President or Congress.

The Committee recognizes the important social and ethical questions which are raised by biotechnology research, particularly that involving the human genome. It, therefore, directs that all reports of the National Biotechnology Policy Board and the Advisory Panel on the Human Genome be forwarded to the congressional Biomedical Ethics Board for review. The referral of such reports prior to their publication should allow for their thorough consideration. The Committee does not intend for reports to be delayed by such review; publication may take place prior to completion of the review. The Committee expects, however, that the congressional Biomedical Ethics Board will continually monitor human genetics issues and provide Congress and the public with periodic summaries of and recommendations regarding the legal, social, ethical, and moral questions raised.

Nutrition

Agencies of the Department of Health and Human Services, through their preeminence in health research, have traditionally played a leading role in the conduct of nutrition research and dissemination of the resulting information. The U.S. Department of Agriculture Human Nutrition Information Service has a complementary role. No change in their respective roles should be made without full examination and authorization by Congress.

NATIONAL CANCER INSTITUTE

1988 comparable appropriation	$1,469,327,000
1989 appropriation request	1,593,536,000
House allowance	1,489,897,000
Committee recommendation	1,591,036,000

The Committee recommends an appropriation of $1,591,036,000 for the National Cancer Institute [NCI]. This is $2,500,000 less than the administration request and $121,709,000 more than the 1988 appropriation of $1,469,327,000.

The NCI has a dual mandate to support basic research and to apply the results of that research to decrease the incidence of morbidity and mortality from cancer. Since the passage of the Cancer Act in 1971, the NCI has used the authorities provided by this act to carry out this mission.

The Committee understands that there is some concern that the Institute in unable to perform renovations of the aging facilities at the Frederick Cancer Research Facility. The Committee has, therefore, transferred $2,500,000 from the Institute's budget request to the NIH "Buildings and facilities" account for this purpose.

Cancer progress

The Committee has heard much discussion about how one measures the success of the Cancer Program, whether incidence, survival, or mortality is the best indicator. It is important that whenever the data are reviewed, that the increase in population size be considered. For example, when looking at mortality statistics comparing 1950 and 1985, the absolute number of deaths has increased. However, excluding lung cancer, there has been a decrease of almost 45,000 deaths in 1985 from what was predicted to occur based on 1950 rates. Clearly, progress has been significant. However, it is recognized that even if the goal to reduce cancer mortality by 50 percent is achieved, the declining mortality from heart disease will move cancer ahead to the No. 1 cause of death.

The Committee is troubled, however, by the findings of a recent GAO report entitled "Application of Breakthrough Therapies." This report noted that up to two-thirds of cancer patients are not getting state-of-the-art treatment. To complement these findings, the Department's year 2000 goal indicated that we could reduce the cancer death rate by 50 percent by: (1) reducing the rate of smoking, (2) improving the American diet, (3) better screening and early detection, and (4) the use of state-of-the-art treatments. The Committee is well pleased with the quality of research supported by NCI and the progress being made with this research. Nevertheless, in view of the fact that existing knowledge is not being fully applied and that with the better application of this knowledge we could reduce the cancer death rate by 50 percent, the Committee is troubled by the relatively small amount of funds devoted to the Cancer Prevention and Control Program. The Committee has, therefore, added language to require that at least $75,000,000 be spent on this program next year.

Finally, the Committee requests that a report be prepared and submitted to the Committee outlining the best professional judgment as to what funding and programs need to be put in place to maximize Cancer Prevention and Control Program outcomes. This report should be submitted to the Committee by February 1, 1989.

The relationship between health and behavior is quite clear. Critical to cancer control are smoking, diet and nutrition, and cancer screening—all behavioral elements. In furthering the year 2000 goals the Committee believes that greater attention should be paid to human behavior and how behavioral variables are critical to the prevention and treatment of cancer. Accordingly, the Committee urges NCI to direct a greater proportion of its funds to health and behavior research this fiscal year.

Basic research

The Nation's investment in the Cancer Program has proven to be a wise one. Through discoveries in basic research many avenues of understanding the cancer process have developed. The basic discovery of reverse transcriptase laid the groundwork for all recombinant DNA research by explaining how certain cancer viruses translate their genetic material into DNA. From this effort, a vast $80,000,000,000 technology industry has developed that includes the knowledge necessary to cut and dissect DNA, clone, sequence, and produce gene products in quantity.

With the aid of the supercomputer, much has been learned about oncogenes, dominant genes that control the growth and development of normal and malignant cells. Scientists have been able to explore conformations of oncogene products which is providing information about their role in gene expression. It may soon be possible to develop computer-simulated three-dimensional molecular structures representing various oncogenes or cancer-related antigens. This would allow scientists to design specific oncogene inhibitors and thus prevent the transformation of a normal cell to a malignant one. These methods also make it possible to design new cancer drugs as well as drugs for combatting AIDS.

With the discovery of autocrine motility factor [AMF], a protein produced by tumor cells, progress has been made in understanding cancer metastasis. Investigators have recently identified the sequential steps that control cancer cell migration and these will be the targets for future treatment programs.

Progress in the battle against AIDS has been possible as a result of successes originating from the Institute's virology program, which has led to the identification of specific viruses that are related to certain types of cancer. Work on the lymphoma virus is noteworthy in that it resulted in the discovery and isolation of the AIDS virus. Further benefits were produced in the form of diagnostic tests for AIDS and the development of anti-AIDS drugs. As information on the structure of the AIDS virus is increased, supercomputer capability will be used to predict the secondary structure of the viral genome and design inhibiting agents.

The Committee is aware of increasing interest in biologics as a form of cancer therapy because of some of the very early and preliminary findings from several studies conducted by the NCI as well as independent research facilities. However, the Committee recognizes that biologics are in their infancy in terms of development and urges the NCI to strengthen its programs in this area. The Committee also urges NCI to continue clinical research opportunities in the area of biologics and evaluation of their potential use in the management of cancer.

Diagnostic imaging techniques

The Committee is aware that a physician's choice of the most effective therapeutic approach is dependent on the information received from the diagnostic evaluation of the patient. Research to improve detection and diagnosis is, therefore, critical. New diagnostic imaging techniques are improving the ability to detect small lesions and to provide better staging information. In fact, several major new diagnostic imaging modalities that demonstrate superior potential in cancer detection, for example, x-ray computed tomography, magnetic resonance imaging, positron emission tomograpy, have emerged in the past 5 years. Thus, in recognition of the importance of this field, the Committee urges the National Cancer Institute to utilize a portion of the increased funding to expand its support of research in the field of diagnostic radiology.

Treatment

The development of biologics has revolutionized the scope of cancer treatment. Since 1979, when the Biologic Response Modifiers Program was established, over 35 biologics have been identified with potential for cancer treatment. Two biologics that have proven to be effective against several of the more resistant cancers are interferon and interleukin-2. Another important development during the past year was the introduction of colony stimulating factors [CSF's] into clinical trials. CSFs are bone marrow growth factors that are now produced in quantity by molecular biologic techniques and are found to be effective in reducing the toxic and sometimes life threatening side effects of chemotherapy.

In the last year, new treatments have been developed for two of the most resistant cancers, bladder cancer and colon cancer. With the addition of these two new therapies, a treatment program that reduces mortality within the study population is available for every common cancer, with the exception of pancreatic and liver cancer. In addition to saving and prolonging lives, treatments today are more tolerable and less morbid, thus enhancing the quality of life. Equal or better survival results now exist in cancers such as breast, colon, bone, and soft tissue sarcomas, while preserving breasts, avoiding colostomies, and sparing limbs.

Inroads have also been made with the perplexing problem of drug resistance. Biochemists studying the mechanism by which cancer cells escape the killing effects of chemicals have now cloned and isolated the genes that control the cells' ability to resist chemicals. Chemicals have been identified with the potential for reversing drug resistance, and in the past year some promising clinical trials have been initiated. The NCI is encouraged to consider the potential of the power burst facility reactor at the Idaho Nuclear Engineering Laboratory [INEL] in the treatment of cancer. Neutrons from this reactor are used in a form of radiation therapy known as boron neutron capture therapy [BNCT] which unlike more conventional therapies does not risk damage to normal tissues.

The Institute has recently established a preclinical screening program for anti-AIDS drugs. Several promising compounds are at various stages of development as anti-retroviral agents, including dideoxycytidine [DDC] and dideoxyadenosine/dideoxyinosine [DDA/DDI].

Prevention

The area of prevention and cancer control has been a high priority of the Institute. From discussions during the hearings, the Committee recognizes that the cancer prevention and control funding mechanism is the primary source of the Institute's applied prevention activities. Many new applied prevention initiatives are being developed with special emphasis on smoking and tobacco use, diet, and minority populations. Although smoking and lung cancer remain a major problem, the per capita smoking rate is lower now than at any time since 1950. Another promising sign is evidenced by the fact that the incidence of lung cancer has declined in both white and black males of all ages.

The relationship between diet and cancer and the manipulation of diets to reduce cancer risk are being explored by scientists in the Institute's Diet and Nutrition Program. Clinical trials have been initiated to evaluate the ability of micronutrients that are added to the diet to intervene in the late stages of the development of cancer. Studies have been conducted that have confirmed the value of mammography as a screening tool for reducing the mortality from breast cancer. Other programs are evaluating the stool guaiac test for its potential to reduce mortality from colorectal cancer.

The Institute's program on epidemiology has identified many cancer causing agents such as cigarette smoke, tobacco, occupational chemicals, viruses, and, more recently, nutrients in the diet. These data, published in numerous reports, have made important contributions to the cancer prevention and control effort. These findings have been responsible for the removal of initiators from the environment, thought to be the first step in the cancer process, and in the second step, interfering with, or removing, promoters in later stages.

Considerable expansion of the Institute's activities directed toward minority populations has taken place. Nearly 20 minority-specific initiatives are in place with the aim of reducing the incidence and mortality of cancer in these populations, especially in view of the disparity in the rates in cancer incidence, treatment, and mortality of minorities.

Application

The current dilemma facing the Institute and the Nation is that many state-of-the-art treatments are not being utilized or received. For instance, it is known that if every woman over the age of 50 had an annual mammogram, mortality from breast cancer could be reduced by 30 percent, thereby saving 15,000 lives. The initiation of the physician data query [PDQ], a computerized information system established to disseminate state-of-the-art information in cancer treatment is a major step in the dissemination of these findings and treatments.

In addition to the PDQ, the NCI network also includes an expanded comprehensive Cancer Centers Program, a nationwide clinical trials program, the Surveillance, Epidemiology, and End Results Program [SEER] that collects data on cancer incidence and survival, and most recently, the Cancer Information Service [CIS], which provides a toll-free number that handles up to 400,000 patient calls annually to provide the latest cancer information to the general public. The mechanisms of education and treatment are in place. The challenge is for full and maximal utilization.

Idaho National Engineering Laboratory

The Committee urges the National Cancer Institute to continue working with, and giving guidance to, the Idaho National Engineering Laboratory [INEL] in developing cancer treatment uses of the power burst facility [PBF] located at the INEL. In particular, the Committee urges NCI to identify what types of clinical trials the NCI believes INEL could participate in. The Committee was pleased that NCI has acknowledged the uniqueness of the PBF and that NCI maintains supporting the PBF in a standby phase.

Clinical research costs

Clinical research which permits the evaluation of new therapies is a vital element of the Cancer Research Program. However, several difficulties are emerging in the pattern of clinical research which may hamper these valuable studies. For example, there is increasing difficulty in recruiting patients for these trials; additionally, because research patients frequently are more seriously ill than others who might be hospitalized for the same illness, appropriate and needed care for them tends to be more expensive. Currently this additional cost is not reimbursed by research grants, and frequently is also not reimbursed by third-party insurance carriers. The Committee therefore requests NCI to evaluate the seriousness of these difficulties and to report to the Committee, prior to next year's hearings, as to what remedies might be available and the costs involved.

Nursing—oncology

The Committee again urges the NCI to continue its systematic efforts to ensure that professional nurses are actively involved in the programs, advisory boards, and committees of NCI. The Committee further reiterates its support for NCI giving priority to the nursing oncology individual research fellowship award program, the nursing clinical training programs, and the implementation of nursing research initiatives. The Committee was especially pleased to note that the NCI Nurse Oncology Training Program which began in 1985 has already doubled the number of baccalaureate nurses who are involved in oncology. The Committee requests that NCI and NCNR submit a joint report, prior to next year's hearings, describing those projects and initiatives which have been supported in the nursing-oncology area.

Cancer centers

The Committee has heard an ever increasing series of complaints regarding the relatively small allocation of funds to cancer centers. The Committee intends to explore this issue thoroughly with NIH and NCI personnel in the upcoming months and focus on the question at hearings next year. Furthermore the Committee requests the NIH to contract with the Institute of Medicine to undertake a study, to be completed for the Committee hearings next year, which will report on the present state of the Cancer Centers Program on its funding and organizational needs required to fulfill the role established for cancer centers in the 1971 National Cancer Act. The Committee expects that the Association of American Cancer Institutes be consulted during the process of this study.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

1988 comparable appropriation	$965,536,000
1989 appropriation request	1,054,503,000
House allowance	1,018,983,000
Committee recommendation	1,056,003,000

The Committee recommends an appropriation of $1,056,003,000 for the National Heart, Lung and Blood Institute [NHLBI]. This is $1,500,000 more than the request and $90,467,000 more than the 1988 appropriation of $965,536,000.

The NHLBI conducts and supports research and research training on diseases of the heart, blood vessels, lung, and blood and on the uses of blood and the management of blood resources. More than half of the deaths in America are due to diseases within the purview of the Institute and the annual cost of these diseases exceeds $154,000,000,000.

The Committee is pleased with the continuing support given by the NHLBI to behavioral medicine and various prevention activities. The Committee is impressed by the importance of these activities to a well balanced research portfolio and commends NHLBI for its continuing vision in this regard. NHLBI is urged to continue its efforts to ensure that professional nursing remains actively involved in its programs. The Committee notes that 55 percent of the deaths each year are caused by cardiovascular, lung or blood related disorders. In view of the importance that behavior and diet modification do play in reducing the risk of these diseases, the Committee is concerned that only $6 million is proposed in the NHLBI budget for education programs. The Committee requests that greater priority be given to education efforts and expects that funding adjustments be considered during the year as opportunities arise.

American Indians

The Committee is pleased that efforts are being made to pursue the unique health care problems of American Indians, as reported by the Office of Technology Assessment.

Silent ischemia

Inadequate coronary blood supply to the heart results in ischemia, which generally results in a characteristic pain, angina pectoris. However, attention is being directed at silent ischemia, where episodes of ischemia appear on electrocardiographic monitoring, but without symptoms. Silent ischemia may be found in those who have no symptom of heart disease, as well as in some who are known to have coronary heart disease, such as angina or a previous heart attack. Research has demonstrated that silent and symptomatic ischemia have different characteristics, patterns, and severity. The importance and methods of treating silent ischemia present major challenges. Further studies of fundamental mechanisms are being investigated to understand the problem, to enhance identification of individuals at risk and to provide information important for treatment and prevention.

Heart attack

Substantial advances are reported on two major facets in the treatment of myocardial infarction, the use of thrombolytic or clot dissolving agents and percutaneous transluminal coronary angioplasty [PTCA], commonly referred to as balloon dilatation. Thrombolytic agents administered intravenously have been effective in dissolving a clot blocking a coronary artery when used in the early hours after an acute myocardial infarction. A bioengineered form of the naturally occurring tissue plasminogen activator (rt-PA, TPA) is one of the drugs that has now been licensed for such use. It is an example of a dividend from an ongoing clinical trial translated expeditiously into clinical practice. The NHLBI also reports that this clinical trial has shown that PTCA, when it is needed, can be postponed for at least 18 to 48 hours after thrombolytic therapy. This finding makes the technique more widely applicable, less hazardous and lower in cost.

Hypertension

The control for hypertension is greatly improved and is in part responsible for the 58-percent reduction in death from strokes in this country. However, the selection of appropriate drug or nondrug therapies would be aided by a better characterization of hypertensive patients as to their possible sodium sensitivity and response to calcium supplementation. These may each be factors for perhaps half the people with high blood pressure. Sodium sensitivity is particularly common in black hypertensives, and studies are under way to examine this as a possible factor to account for the higher death rates from stroke in the Southeastern United States.

Artificial heart

The Institute reports progress in developing a fully implantable mechanical circulatory support system that is expected to allow an unencumbered, relatively normal ambulatory state. Extensive bench and animal tests for long-term reliability are progressing satisfactorily with an electrically energized, fully implantable left ventricular assist device that can take over this pumping function of the failed natural heart.

Clinical studies with such a long-term ventricular assist system are being planned.

The Committee notes that in the fiscal year 1989 budget submission that the NHLBI has let contracts for a 5-year period to develop an implantable biventricular artificial heart capable of supporting patients with end-stage heart disease for up to 5 years. The Committee is also aware of the recent advances in the area of left ventricular assist devices and NHLBI's decision to move into clinical trials with the device. While the Committee supports NHLBI's decision to move into clinical trials with the left ventricular assist device, the Committee also acknowledges the May 19, 1988, resolution passed by the National Heart, Lung, and Blood Advisory Council stressing the importance of developing a fully implantable, long-term, totally artificial heart. Therefore, the Committee urges the NHLBI to give every consideration to continuing the artificial heart research in fiscal year 1989 if permitted within available funds.

Chronic obstructive pulmonary disease [COPD]

COPD is the fifth leading cause of death in this country and the only leading cause of death that is increasing substantially. Emphysema is one of the major contributors to COPD and affects some 2 million Americans, including some 20 to 40,000 who have an inherited deficiency of alpha-1-antitrypsin (AAT), a blood protein which in normal individuals protects the lung. It has been shown that weekly infusions of AAT can maintain adequate levels in the lung and blood of these patients. Studies are now underway to determine if correction of the biochemical abnormality slows the progression of their emphysema.

Sleep apnea

Sleep disturbances are a clinical problem caused by more than simply emotional or situational disturbances. Sleep apnea is more common than previously believed and its incidence has been found considerably higher among those who are obese or hypertensive. The resultant excessive daytime sleepiness and diminished quality of life are significant clinical issues that require the expertise of both scientists and clinicians. The Institute, in response to Congressional concern, and to accelerate and integrate fundamental and clinical research, is soliciting applications for specialized centers of research on cardiopulmonary sleep disorders.

Cystic fibrosis

The basic defect in this most common genetic disease, one that is manifest in childhood, is a breakdown in the regulation of sodium and chloride ion transport across epithelial cell membranes. To accelerate research on this problem, the Institute is encouraging a basic research program to develop immortalized airway epithelial cells from cystic fibrosis patients so that cells expressing the characteristic defect are available in the laboratory for studies of the underlying mechanisms and potential therapies. The Institute is also soliciting applications for specialized centers of research on cystic fibrosis.

Erythropoietin

Through recent progress in establishing the structure and in cloning the gene of erythropoietin, a hormone that regulates red blood cell production, large quantities are now available. This should have a significant impact on the treatment of the anemia associated with end-stage renal disease, which affects some 85,000 patients and requires about 300,000 units of red blood cells annually. Recombinant erythropoietin, by stimulating the production of fetal hemoglobin, also holds promise for patients with sickle cell disease and patients with Cooley's anemia.

Sickle cell disease

Comprehensive sickle cell centers, which focus on the prevention or correction of complications of this genetic blood disease, recently underwent competitive renewal. Basic research efforts in the new generation of sickle cell centers are designed to enhance our understanding of disease at the cellular and molecular level, to lead to better treatment and preventive approaches, and hopefully to bring us closer to a cure for this disease.

Cooley's anemia

Patients with Cooley's anemia require frequent blood transfusions which often lead to iron overload in vital organs. Currently a treatment utilizing a pump-operated chelator, infused under the skin or intravenously for 8 to10 hours a day, every day, assists in disposing of that iron overload. This regimen is extremely difficult for patients to follow. The Committee was pleased to learn that there are improved research opportunities for the development of chelators taken orally which would obviate the necessity for pump-operated infusions. The NHLBI is urged to pursue these opportunities vigorously.

AIDS

With its research responsibilities related to the Nation's blood supply, the Institute is supporting research into even more effective tests for screening donated blood for the virus that causes AIDS and for other recently discovered retroviruses. In addition, the Institute is engaged in research on the pulmonary complications of AIDS, the infection of heart muscle with the AIDS virus, and the anemia associated with the treatment of AIDS.

Education programs

During the past year, the National Blood Resource Education Program has been added to the already successful national education programs to control high blood pressure and high blood cholesterol. The new program is developing educational programs aimed at potential donors and recipients of blood components, as well as health professionals who use and manage the Nation's blood resources.

Bone marrow registry

The Committee supports the establishment of a national bone marrow registry and has included $1,500,000 in fiscal year 1989 for its establishment at the National Institutes of Health. This amount is consistent with pending authorization levels. The Committee recognizes that the Naval Medical Research Institute of the U.S. Navy is currently supporting a national registry of bone marrow donors, but the Department of the Navy feels that such a registry is not within its mission and no longer wishes to support it. The Committee believes that the National Heart, Lung, and Blood Institute is the appropriate agency to assume responsibility for such a registry. The Institute could continue the arrangement established under the current Navy contract, but is not mandated to do so. This effort is consistent with the recommendation of the Public Health Service in its March 1988 evaluation of the National Bone Marrow Registry prepared for this Committee.

Cardiac energetics

Within its intramural program, the National Heart, Lung, and Blood Institute [NHLBI] is starting a new research direction in basic energetics to better understand the use of energy by the human heart. Insights into cardiac metabolism will be used to guide the development of new strategies in the prevention and treatment of disease and to develop methods of evaluating heart function without cardiac catherization or ionizing radiation. Such state-of-the-art, noninvasive techniques as magnetic resonance imaging and optical spectroscopy are to be utilized. The Committee is pleased to learn about this program since this research may provide entirely new noninvasive diagnostic procedures that could significantly improve the detection and characterization of early heart disease or identify high risk populations.

NATIONAL INSTITUTE OF DENTAL RESEARCH

1988 comparable appropriation	$126,297,000
1989 appropriation request	130,683,000
House allowance	127,315,000
Committee recommendation	132,578,000

The Committee recommends an appropriation of $132,578,000 for the National Institute of Dental Research [NIDR]. This is $1,895,000 more than the administration request, and $6,281,000 more than the 1988 appropriation of $126,297,000.

The NIDR conduct and supports research and research training on diseases and disorders affecting orofacial tissues, as well as basic research on the growth, maintenance, repair, regeneration, and rehabilitation of oral tissues. Major areas of research include dental caries and periodontal diseases, cleft lip and other craniofacial defects, epidemiology, pain and behavioral studies, sensory-motor dysfunctions (for example, disorders of taste and swallowing), salivary gland disorders, soft tissue infections, and the oral manifestations of systemic disorders such as AIDS.

Older Americans

Based on findings from its 1985–86 National Survey of the Oral Health of Employed Adults and Older Americans and the urging of Congress, the NIDR undertook a major planing effort to develop a feasible strategy to significantly improve the oral health of adults and older Americans. A plan was developed with the assistance from both the dental research community and from the Department. The plan targets the elimination of tooth loss and the identification of individuals at all ages who are at high risk for oral diseases. The Committee is pleased with the serious attention that the NIDR has given to the oral health problems of older Americans and urges the Institute to proceed with efforts to accelerate the transfer of dental research into practice. The Committee urges the NIDR to seek the full involvement of the private and public sectors in the implementation of a program of research and action to improve the oral health of adults and older Americans. Furthermore, the Committee requests that an interim report on the progress made and other action steps be submitted by February, 1989.

Aging research

The NIDR received 14 applications in response to a 1987 request for applications for research centers on oral health in aging, a joint effort with the National Institute on Aging and the Veterans Administration. The Institute expects to fund several such centers in fiscal year 1988, as part of an expanded effort to address the oral health of older Americans. The Institute is emphasizing the need to identify individuals at risk for oral disorders, using such techniques as genetic probes to detect disease-causing bacteria, as well as developing improved restorative materials and implants, and stimulating research on ways to reverse disease and regenerate lost tissue.

Eliminating toothlessness

Recent NIDR national surveys indicate that children and working adults are experiencing improvements in oral health. For example, only 4 percent of employed adults between 18 and 65 seen in a 1985–86 survey were missing all their teeth. In addition, a survey of school children completed in 1987 confirms that the declines in tooth decay noted in a 1979–80 survey are continuing, while the number of children who have never had a cavity has increased to almost 50 percent. To ensure that these gains in oral health are maintained over the lifetime, NIDR has initiated plans for a major research and demonstration research effort aimed at eliminating toothlessness in future generations. The effort will be coordinated with other health agencies, the dental community, private industry, and the public.

AIDS research

NIDR AIDS research has concentrated on oral lesions associated with HIV infection, studies of the AIDS virus, and immunologic deficits, particularly those seen in monocytes. In addition, researchers have detected changes in components of saliva occurring early in the natural history of the disease. Most recently, these researchers have reported preliminary findings that the saliva of healthy adults contains a factor that inhibits the ability of the AIDS virus to infect immune cells.

Chemically modified tetracycline

Investigators have modified tetracycline to remove the drug's antibiotic properties while retaining the ability to inhibit the body's production of an enzyme that breaks down connective tissue. This chemically modified tetracycline should be safe and effective for long-term treatment of periodontal diseases without inducing bacterial resistance.

Dental fear and anxiety

Behavioral scientists have developed a variety of nonpharmacological methods to reduce dental fears. For example, one videotaped program combines information about dental fear with coping skills and relaxation techniques. The Committee notes that over $14,000,000 is expected to be spent on pain and behavior research and another $1,000,000 for outreach efforts aimed at reducing dental fear and anxiety. This level of effort has continued for a number of years. The Committee supports these outreach efforts but requests that the pain and behavior research be reviewed carefully before preparation of the next fiscal year budget to determine if the development of new knowledge in this area justifies the continued expenditures of these sums or whether some adjustment in priorities is not indicated.

Dentist-Scientist Program

Four years ago, the Institute announced the implementation of a new dentist-scientist award, a 5-year research and study program for dental graduates who wish to pursue careers in research. The objective of the program is to facilitate the movement of research from basic to clinical application by increasing the pool of investigators who combine research knowledge and skills with the expertise of the dental practitioners.

Without a fresh supply of talent, the research enterprise is stalemated. The problem is particularly acute in the case of dental clinical investigations, where the number trained has been declining sharply over the past decade, Thereby impeding the rate of transfer of research results to dental practice.

Over the last 4 years the committee has provided funds to support 100 dentist-scientist candidates. For fiscal year 1989, the fifth and final year of the plan, the Committee has provided $1,895,000 over the president's budget for the Dentist-Scientist Program, in order to permit the Institute to fund an additional 25 awards.

Centers

The Committee recognizes that an important tactic in the Institute's strategy for solving oral health problems has been the establishment of centers to focus research efforts on specific disorders, such as periodontal disease and tooth decay. It appears that these thematic centers fill a major gap in the Institute's dental research program. Increasing the number of centers and establishing CORE clinical research centers would help expand the research capabilities of institutions that have already made a commitment to strengthen their research activities. The Committee notes that this action was recommended in the report submitted to Congress in October of 1985 titled "Use of the Centers and Related Large Grant Mechanisms of Support in Meeting the Nation's Dental Research Needs."

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

1988 comparable appropriation	$534,733,000
1989 appropriation request	565,908,000
House allowance	546,902,000
Committee recommendation	565,908,000

The Committee recommends an appropriation of $565,908,000 for the National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK]. This is the same as the administration request and $31,175,000 more than the 1988 appropriation of $534,733,000.

The NIDDK conducts and supports research and research training in the areas of diabetes, endocrinology, and metabolic diseases; digestive diseases and nutrition; and kidney, urologic, and blood diseases.

The Committee is concerned about the significant shortage of young investigators entering the field of digestive disease research and urges that efforts be accelerated to encourage more interdisciplinary participation in this field.

The Committee is pleased with the progress of the kidney and urology centers in addressing research opportunities relating to diseases within their expertise. It appears, however, that there is a very significant shortage of trained research urologists. The Committee recommends that NIDDK consider supporting at least two research trainees per center, to the extent possible within available funds.

The Committee is concerned about research efforts being made with respect to two similar digestive disorders known as Crohn's disease and ulcerative colitis and directs the National Institute of Diabetes and Digestive and Kidney Diseases to expend more funds on researching these diseases.

Diabetes

A disease of major proportions, diabetes mellitus affects 11 million Americans and incurs an economic burden of $14,000,000,000 annually. Recent research has revealed that in juvenile-onset (Type I) diabetes, a multigene defect is responsible for the autoimmune destruction of insulin-producing cells of the pancreas. As a therapeutic intervention to avert the serious complications of this disease, pancreas transplantation is being investigated, as well as islet cell transplantation. In a major scientific advance this year, NIDDK grantees homed in on the precise section of an immune-regulating gene that may act as an agent in either promoting or resisting the disease.

In adult-onset (Type II) diabetes, defects in the cell's insulin receptors result in a diminished response to insulin. The cloning of the gene for the insulin receptor is enabling scientists to probe its behavior to better understand the nature of insulin resistance. Initiatives in drug development are pursuing approaches that may prevent, delay, or reverse complications associated with diabetes that affect the kidneys, eyes, and nerves. A major clinical trial involving 1,400 patients, the Diabetes Control and Complications Trial [DCCT], is comparing the effects of two treatment regimens on the vascular complications of the disease.

In recognition of the disproportionate impact of diabetes on minority populations, the NIDDK is sponsoring a Workshop on Diabetes in Hispanics and a Symposium on Diabetes in Black Americans.

The Committee has been advised that as a result of a recent RFA, the NIDDK has received a large number of excellent research applications. Kidney disease, diabetes mellitus, has been designated as the highest priority by the Kidney Disease Scientific Committee. The Committee urges NIDDK to support the most promising of these applications in fiscal year 1989.

Diabetes in the American Indian population

The Committee is very concerned that diabetes mellitus is the seventh leading cause of death among Indian Health Service [IHS] service populations and that according to the OTA the age-adjusted death rate in IHS areas exceeds that of the rest of the Nation by more than 280 percent and is a growing problem. There is a clear Federal responsibility for this population. The Committee accordingly directs the NIDDK to work closely with the leadership of the Indian Health Service and to establish this fiscal year a special grant or contract priority for addressing the truly pressing needs of American Indians and Alaskan Natives. Further, the Committee directs NIDDK to prepare a detailed report for the Committee and the Senate Select Committee on Indian Affairs describing what steps have been taken in response to this directive.

Endocrinology

The endocrine system produces hormones that influence metabolism and basic life processes. A recently discovered family of hormones, the inhibins, has been found to be implicated in the inhibition and stimulation of red blood cell production, as well as fertility and reproduction. In other studies, intramural scientists are exploring the roles of calcium channels and regulatory proteins in controlling the secretion of parathyroid hormone, a crucial factor in governing levels of calcium in the body. The risk of Creutzfeldt-Jakob Disease in recipients of human growth hormone will be evaluated in an epidemiologic study that includes a survey of recipients and family members.

Metabolic diseases

Inherited metabolic diseases, which include many orphan diseases, often result in debilitating illness and premature death. New genetic technologies have permitted the search for the cystic fibrosis gene to progress to the point that the gene is believed to exist on a small portion of chromosome 7. The Institute's current plans to establish Cystic Fibrosis Centers will facilitate further studies to determine the defective gene's role in causing the disease, develop more effective treatments, and design methods to identify carriers of the disease.

The Committee commends both the NIDDK and the NHLBI for promptly initiating a Cystic Fibrosis Centers program. This program shall continue in an effort to create an effective public-private funding mechanism to support the highly effective cystic fibrosis research network across the country.

The advent of new technologies has enabled intramural scientists and industry to produce a human protein, in mouse milk, used to treat heart attacks and blood clotting disorders. Inexpensive and large-scale production of this, as well as other proteins, should now be made possible.

Digestive diseases

Collectively, digestive diseases impose a heavy burden on our country in terms of pain and suffering, massive health care costs, and economic losses—reflected in lost wages and productivity—of approximately $50,000,000,000 each year. However, significant advances continue to be made in digestive diseases research. One recent advance relates diminished contractility of the gallbladder, a contributory factor of gallstone formation, to hormones which regulate the gallbladder. Other studies reveal that gastrointestinal function and nutrition in AIDS is critical to understanding and treating the wasting phenomenon of AIDS patients. In ulcer research, intramural researchers have developed a potent drug therapy to abolish acid secretion that offers broad promise of controlling gastric acid hypersecretion in peptic ulcers and Zollinger-Ellison Syndrome. In addition, recent findings have repeatedly demonstrated an association between a bacterial strain with gastritis, resulting in stomach and duodenal ulceration. Fortifying research in liver diseases is the establishment of a liver cell culture facility, a liver procurement and distribution system, and a liver transplantation data base.

Among the various promising projects are research on the structure of gastrointestinal muscles leading to better understanding of contractive processes and mechanochemical energy conversion. Studies on factors leading to liver cell injury fibrosis, and death, and basic and applied studies on liver transplantation, including techniques of presentation and storage. Colonoscopy techniques have been greatly improved resulting in excellent opportunities to observe and remove precancerous polyps.

The Digestive Disease Centers Program fosters an interdisciplinary approach to facilitate collaborative studies among basic and clinical investigators into the causes, diagnosis, prevention, and treatment of digestive diseases and nutritional disorders. Pilot programs allow young investigators to conduct feasibility studies on new approaches to treatment techniques in an intellectually enriched environment. The Committee is very pleased with the continued progress in this program and requests that the feasibility of a center's approach be explored in pediatric GI research.

The Committee remains concerned about the severe shortage of young investigators entering the field of digestive disease research and urges the Institute to accelerate efforts to encourage more participation in this area.

Nutrition

Such diverse areas as nutrient metabolism, eating disorders, and obesity are included in the Institute's nutrition program. Because obesity poses a substantial threat to disease prevention, it is a major focus of research. A recent discovery has identified a fat cell-derived protein that responds to both nutritional and hormonal stimuli, and in some forms of obesity serves as a marker. Also related to obesity is the recently acquired knowledge that abdominal accumulation of fat cells is associated with greater cardiovascular risk. Further research concluded that a low rate of energy expenditure may contribute to the aggregation of obesity in families, which suggests a genetic basis for individual variability in weight gain.

Kidney and urologic diseases

Of the more than 13 million Americans who suffer from kidney and urinary tract diseases, some 85,000 patients with end-stage renal disease [ESRD] require dialysis, and an additional 7,000 are in need of kidney transplantation, assuming a combined cost of nearly $3,000,000,000 annually. Since diabetics constitute a major component of the ESRD population, the Institute has currently under way a major, multifaceted initiative which incorporates epidemiology, clinical, and natural history studies with the ultimate goal of controlling the development of kidney disease of diabetes mellitus. To meet research needs on this patient population, the NIDDK is also presently establishing a consolidated ESRD data base and is expanding the modification of diet in renal disease study into full-scale phase. This major clinical trial is studying the effects of a restricted protein or phosphorous diet in patients with chronic, progressive renal disease.

In the area of interstitial cystitis, a painful and persistent bladder disease, a workshop was recently held in which clinical and basic scientists gathered to suggest various research avenues to pursue. Moreover, a recently discovered prostate-specific growth factor has added to our knowledge of benign prostatic hyperplasia, a condition characterized by renewed growth of the prostate in the middle-aged male.

Hematology

Developed with NIDDK support, human recombinant erythropoietin has been shown in clinical trials to increase energy and sense of well-being in dialyzed patients with associated anemia. Studies of the genetic control of the production of hemoglobin are providing important insights into sickle cell disease and thalassemia.

Interstitial cystitis

The Committee urges NIDDK to specifically address the problems facing those afflicted with interstitial cystitis [IC] and to work closely with the IC Association to establish a national registry which would allow epidemiological data to be gathered and stored in one central location. The Committee further urges NIDDK to establish a 5-year plan to ensure that appropriate research protocols will be developed in a timely fashion.

Pediatric nephrologists

The Committee is concerned about the critical shortage of pediatric nephrologists and notes that there is either no or just one pediatric nephrologist in 22 States. To address this alarming situation, the Committee urges the Institute to retarget its research training funds to address this situation.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

1988 comparable appropriation	$534,692,000
1989 appropriation request	570,978,000
House allowance	557,046,000
Committee recommendation	477,878,000

The Committee recommends an appropriation of $477,878,000 for the National Institutes of Neurological Disorders and Stroke [NINDS]. This is $93,100,000 less than the administration request and $56,814,000 less than the 1988 appropriation of $534,692,000.

The NINDS conducts and supports research and research training on disorders of the human brain and nervous system. These disorders include diseases such as epilepsy, multiple sclerosis, and head and spinal cord injury. Research efforts also encompass studies of neurogenetic disorders, such as Huntington's disease, muscular dystrophy, and Batten's disease.

The Committee has transferred $93,100,000 of research activities from the National Institute of Neurological and Communicative Disorders and Stroke to the newly created National Institute on Deafness and Other Communication Disorders. In making this transfer of responsibilities, the Committee has also renamed the Institute to the National Institute of Neurological Disorders and Stroke. The Committee recognizes that the amount to be transferred to the new Institute remains open for continued discussion between now and the time of conference with the House.

The Committee is supportive of research in the areas of sleep disorders and narcolepsy. Increased efforts targeted toward these areas would be appropriate. The Committee recommends that consideration be given to a greater level of resources dedicated to narcolepsy research, and that the Institute explore methods of establishing a better focus throughout the NIH, and the scientific community on this important disorder.

The Committee was most pleased to learn that a nurse has now been appointed to the NINDS Advisory Council and that plans have been developed with the NIH Clinical Center for joint funding of a 9-month program for nurses to receive special training on the care of neurological and neurosurgical patients. NINDS is encouraged to continue these efforts to ensure that professional nursing is actively involved in its programs and further to work closely with the National Center for Nursing Research to develop collaborative projects, especially on the care of patients with Alzheimer's disease and stroke, as the Committee recommended last year.

Head injury

An estimated 400,000 to 500,000 Americans suffer head injuries severe enough to cause death or admission to a hospital each year. Although the precise number is unknown, certainly an equal number of Americans have head injuries that are thought to be less debilitating. For some time, scientists have believed that when damaged, nerve cells in the brain were incapable of regeneration. However, recent work shows that under special laboratory conditions these damaged nerve cells may be able to function again. Researchers have demonstrated that nerve cells from the mammalian central nervous system sprout new branches when they are in contact with the supporting cells associated with skin and muscle nerves, thereby showing that adult brain cells have the capacity for growth. Recently, an interagency head injury task force was established to coordinate efforts with other Government agencies in identifying gaps in research, in training, and in service delivery to address the needs of patients suffering from severe head injury.

Spinal cord injury

Thousands of Americans are disabled by traumatic injuries to the spinal cord every year. As part of the Institute's effort to alleviate the personal tragedy and national burden of spinal cord injury, the NINDS is sponsoring a multicenter randomized double blind study of promising drugs that may ameliorate paralysis after injury. Five NINDS-sponsored Spinal Cord Research Centers are conducting research to enhance understanding of the events that happen in the interval between spinal cord injury and the death of nerve cells, an interval during which effective treatment may result in the prevention or amelioration of paralysis. Researchers are attempting to identify the biochemical events that occur subsequent to spinal cord injury and develop interventions that will prevent or lessen the resulting damage, thereby improving the patient's chances for a favorable outcome.

The Committee believes that the area of spinal cord injury research presents some unique research opportunities and that the results of this research may have far-reaching consequences for other medical research. Spinal cord injury research programs such as the Miami project to cure paralysis located at the University of Miami School of Medicine should be adequately funded. The Committee urges the National Institute of Neurological and Communicative Disorders of the National Institutes of Health to make available $500,000 for spinal cord injury research.

Brain imaging

Recent strides in basic knowledge about the biochemistry of the brain have unlocked secrets about how the brain, the body's most complex organ, functions. Increasingly sophisticated brain imaging techniques, such as positron emission tomography [PET], single photon emission computed tomography [SPECT], and magnetoencephalography [MEG], are allowing scientists to actually watch as the brain undergoes its normal processes. PET is assisting investigators in exploring the identity and role of the chemical substances, called neurotransmitters, that carry messages between nerve cells. NINCDS-supported PET research centers are studying cerebral metabolism and receptor physiology on a broad range of neurological disorders.

Coordination with the National Institute of Mental Health

To coordinate work which is often closely paralleled, the administrative and scientific leadership of the NINDS and the National Institute of Mental Health [NIMH] maintain close contact. For example, the Director of the NINDS serves as a member of the NIMH task force on schizophrenia, and the NINDS Deputy Director will serve on the National Advisory Council at the NIMH. These collaborative efforts are important to ensure that the latest advances in the neurosciences and the resultant clinical implications are shared between the two Institutes and fully exploited for the benefit of patients with mental disorders.

The Committee continues to be very supportive of cooperative and collaborative efforts between the NINDS and the National Institute of Mental Health. The Committee feels that these efforts should be especially productive in the areas of schizophrenia and in AIDS-related diseases.

Epilepsy

Approximately 2 million Americans suffer from epileptic seizures. For many of these patients, the development of new drugs is the only hope for a better life. An NINDS program for the development of antiepileptic drugs has been created to promote more effective, nontoxic drugs for people with epileptic seizures. For patients with epilepsy which is intractable to medications, surgical therapy is virtually the only therapeutic avenue remaining. Yet surgical therapy is expensive, the evaluation is prolonged, unpleasant, and often dangerous, and the procedure is currently available to only a few hundred of the tens of thousands of possible candidates. The NINDS is encouraging new studies of better approaches to surgical management in hopes of reducing morbidity and making this procedure available to greater numbers of affected persons with epilepsy.

Javits junior clinical investigator awards

With the encouragement of the Institute's Advisory Council, the NINDS has recently developed a mechanism to meet the need for clinical research career development at the postdoctoral level. While the Javits Neuroscience Investigator Award provides established investigators with up to 7 years of grant support, the Javits Junior Clinical Investigator Award will provide promising medical and surgical residents with combined research and clinical experience in NINDS-supported research program projects and clinical research centers. This program will have particular appeal to young persons preparing for academic careers in otolaryngology, neurosurgery and child neurology—all clinical research disciplines of documented national shortage.

Multiple sclerosis

Multiple sclerosis [MS], believed to result from a dysfunction of the immune system, is a chronic and usually debilitating disease of the central nervous system affecting the brain, the spinal cord and optic nerves. Recent research findings point to a possible viral cause in some of the cases of multiple sclerosis. In order to follow up on these early findings, the Committee supports an expanded effort to investigate the etiology and pathogenesis of retrovirus-associated neurologic disorders.

To further our ability to some day manage this disease with appropriate therapies, the Committee encourages that increased efforts be directed toward clinical trials for MS and related diseases. Since multiple sclerosis is a variable disorder and can be slowly progressive, these trials necessarily need to last a number of years, sometimes 5 or more.

Decade of the brain

The National Advisory Neurological and Communicative Disorders and Stroke Council has prepared a report to the Congress that describes recent discoveries and research opportunities in the neurosciences, and outlines research priorities for the next 10 years. The report, called "The Decade of the Brain," has been sent to Congress and will serve as a framework in which a multiyear effort can be made to capitalize upon the growth in fundamental knowledge in the neurosciences.

Positron emission tomography [PET]

Recent strides in basic knowledge about the biochemistry of the brain have unlocked secrets about how the brain, the body's most complex organ, functions. Increasingly sophisticated brain imaging techniques, such as positron emission tomography [PET], single photon emission computed tomograpohy [SPECT], and magnetoencephalography [MEG] are allowing scientists to actually watch as the brain undergoes its function in health and disease. PET is assisting investigators in exploring the identity and role of the chemical substances, called neurotransmitters, that carry messages between nerve cells. NINDS-supported PET research centers are studying cerebral metabolism and receptor physiology on a broad range of neurological disorders such as stroke, head injury and epilepsy. They serve as national resources and are recognized internationally as the most advanced units in the world. PET research centers were initially funded through a special increase to the NINDS appropriation 10 years ago. This was necessary because of the very high cost for equipment and for operations and maintenance of the centers. Nine PET centers must compete for renewal during fiscal year 1989. Funds for the competing continuation grants for these centers are not included in the President's budget for 1989. Because of the high costs associated with these centers, only three are likely to be able to receive funding under the proposed budget. The Committee encourages the institute to insure that the same number of PET centers will be funded in fiscal year 1989 as were funded in fiscal year 1988. Future funding of the PET research centers will permit continuing important advances in knowledge of disorders that include stroke, epilepsy, Alzheimer's disease, Parkinson's disease, head injury, brain tumors and a wide varieity of neurogenetic disorders.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION DISORDERS

1988 comparable appropriation	
1989 appropriation request	
House allowance	
Committee recommendation	$96,100,000

The Committee recommends an appropriation of $96,100,000 for the National Institute on Deafness and Other Communication Disorders [NIDCD]. This is approximately $3,000,000 more than requested by the administration for communication disorders. The administration did not request the creation of an Institute on Deafness and Other Communication Disorders.

The Committee fully expects NIH to proceed without delay to create this new Institute needed to provide a more focused research program for prevention, treatment and rehabilitation of communication disorders.

Research program

Activities include research on the causes of hearing loss, as well as on prevention, treatment and rehabilitation. For totally deaf people several new neural prostheses are under development that could enable them to hear sounds previously unheard. One such device, the cochlear implant, enables the wearer to distinguish the presence of sound and some of its basic characteristics. Eventually the refinement of these devices may permit deaf people to differentiate essentailly all sounds, including human speech.

The Committee is concerned that a serious shortage of clinical scientists in the field of otolaryngology research trained to work on problems of hearing and communicative disorders now exists.

Recent studies by the NIH estimate about 20 million Americans suffer from such disorders, and among the elderly, about 30 percent of those aged 65 to 74 have hearing losses, as do more than 50 percent of those over the age of 74.

Clearly, there is a need for a long-range research strategy to develop the necessary numbers of clinical researchers in this field, and the NIDCD is urged to develop such a strategy with research leaders in the field.

Transfer from NINDS

The Committee has used fiscal year 1987 actual funding levels for the Division of Communicative and Neurosensory Disorders as the basis for calculating the amount of funds that should be transferred to the new Institute. The Committee recognizes that even this approach is imprecise and may need to be adjusted. The Committee expects to consult with NIH officials more extensively between the time of Committee action and conference with the House in an effort to find a satisfactory level for transfer.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

1988 comparable appropriation	$638,800,000
1989 appropriation request	745,352,000
House allowance	732,453,000
Committee recommendation	758,352,000

The Committee recommends an appropriation of $758,352,000 for the National Institute of Allergy and Infectious Diseases [NIAID]. This is $13,000,000 more than the administration request, and $119,552,000 more than the 1988 appropriation.

The NIAID conducts and supports basic and clinical research and research training in two major scientific areas: infectious diseases and diseases related to immune system disorders. The primary purpose of these activities is to develop or extend the knowledge and methods required for the prevention, diagnosis, and treatment of these diseases.

AIDS

With the lead role in AIDS research, the NIAID supports basic and clinical investigations ranging from fundamental studies on the biology of the AIDS virus to applied therapeutic and vaccine research. These activities fall into five basic areas: epidemiology, pathogenesis, studies on the etiologic agent, drug development and evaluation, and vaccine development and evaluation.

A significant advance in understanding the disease process in AIDS includes the precise delineation of the nature of the mechanisms whereby the human immunodeficiency virus binds to and destroys cells of the immune system. For some time it was known that the T4 lymphocyte, which is the critical inducer cell of the immune system responsible for regulating all the other components of the system, was the major target of HIV. Recently it was discovered that monocyte-macrophages, the scavenger cells of the immune system, can also be infected by the virus but not destroyed. The monocyte-macrophage thus serves as the major reservoir of the virus and can actually spread the virus to different parts of the body. This finding has presented an additional hurdle in the search for therapeutic agents that can eradicate the virus.

The discovery and development of new drugs to treat and vaccines to prevent AIDS are of high priority to NIAID. Two important initiatives launched by the Institute emphasize multidisciplinary research involving collaboration of academia, government, and industry in these endeavors. They are the National Cooperative Drug Discovery Groups for the treatment of AIDS [NCDDG's] and the National Cooperative Vaccine Development Groups [NCVDG's].

The NCDDG's exploit leads from basic studies in virology, immunology, molecular biology, protein chemistry, organic chemistry, x-ray crystallography, medicinal chemistry, and pharmacology. This collaborative effort will ensure the successful development of new therapies having potential in the treatment of AIDS, and, in fact, is already yielding promising compounds for preclinical development. The model of the NCDDG's has been applied to the NCVDG's. The latter program has recently been initiated and has been well received by the academic and industrial community.

In the NIAID Intramural Research Program, the first AIDS vaccine trials are underway—evaluating the safety and immunogenicity of the vaccine in small numbers of volunteers. This preparation consists of a protein of the AIDS virus engineered by NIAID scientists using recombinant DNA technology. The NIH Clinical Center and the NIAID-supported vaccine evaluation units are testing this vaccine. It is anticipated that other candidate AIDS vaccines will enter clinical trials in the near future.

During the last year, NIAID expanded its clinical trials network from 19 to 35 treatment sites by the addition of the AIDS clinical study groups [CSG's]. The CSG's were combined with the existing AIDS treatment evaluation units, forming a cohesive network called the AIDS clinical trials group. The scope of activities of the group ranges from phase I pilot studies of new drugs to national multicenter studies comparing several therapies. Over 3,100 patients are enrolled in clinical trials, with 27 protocols underway, and 18 agents being studied.

In addition to the wide range of research efforts in AIDS, the NIAID considers it important to translate the latest research findings into clinical practice. The Institute's efforts in this area include support of conferences for health care professionals, dissemination of information about AIDS clinical trials, support of demonstration projects, and outreach programs in some of the AIDS clinical trials units.

The Committee has provided $13,000,000 more than the President's request for AIDS-related clinical trials. The Committee is concerned that the cost of conducting clinical trials has been more than initially anticipated. Therefore, additional moneys have been provided to ensure maximum participation of patients in trials in a diversity of geographic locations across the country. The Committee also understands that the costs of clinical evaluation in the pediatric population are substantially greater than for equivalent studies in adults. The additional funds are intended to ensure adequate funding for an expansion of the pediatric clinical trials conducted by the NIH. The Committee recommends that $7,000,000 of this total be allocated to pediatric clinical trials.

The Committee is pleased with the efforts to date that the NIH has made in designing a comprehensive approach to develop and test a vaccine against HIV. In the past, vaccine development in many diseases has been slowed because of our lack of scientific information on vaccine adjuvants to increase the effectiveness of the vaccine candidate. With the major milestone that we have made in the past several years in this field, perhaps our technology is at a point where we can further explore the uses of adjuvants in the development of an AIDS vaccine. The Committee directs additional emphasis be given to the development of adjuvant technology in the vaccine development program.

The NIH has established a program to discover, develop and evaluate candidate anti-AIDS drugs to treat persons with HIV infection. However, the Committee has had testimony about the lack of opportunities for physicians and patients to participate in evaluation of anti-AIDS agents in some communities. Therefore, the Committee urges the NIH to incorporate into its program a community research initiative component, including community hospitals and community health care centers. This program should be designed to allow for the participation of community physicians in the evaluation of candidate anti-AIDS agents. The Committee will be interested in hearing from the principals involved about the progress of this program at next years appropriations hearings.

In a further effort to rapidly disseminate the vital information relating to promising treatments for AIDS, the Committee directs that the NIH work closely with the Health Resources and Services Administration to disseminate research findings to health professionals, patients and community networks.

Enteric diseases

Enteric diseases are responsible for millions of deaths per year among young children in the developing world and are an important cause of illness among infants and young children in developed nations as well. NIAID scientists have contributed to the development of vaccines against rotaviruses, the most important cause of infant diarrhea. Recent tests of a combination human-rhesus rotavirus vaccine by NIAID scientists make the prospects for development of a rotavirus vaccine excellent.

Progress has also been made in dealing with other established enteric problems. A new oral vaccine for typhoid has been submitted to the FDA for licensure. Clinical trials of a purified polysaccharide typhoid vaccine have also been successful. A new era in typhoid vaccination is emerging that offers hope in the developing world where this disease remains a problem. In addition, a new oral cholera vaccine is ready for evaluation in the field in collaboration with the NIAID-supported Center for Vaccine Development at the University of Maryland and Mahidol University in Bangkok, Thailand. These improved vaccines would also be used for millions of Americans traveling to developing countries, as well as the Armed Forces personnel stationed in these areas.

Pertussis

Important progress was made in the development of an improved vaccine to prevent pertussis (whooping cough) without adverse side effects. The large clinical trial, conducted in Sweden, comparing two Japanese acellular pertussis vaccines, clearly showed that the vaccine was safe and effective in preventing pertussis in Swedish children. These and other promising pertussis vaccines will continue to be evaluated in the vaccine evaluation units.

Herpesvirus infections

In addition to the papillomaviruses, herpes simplex and cytomegalovirus are viral infections that have serious consequences for newborns. NIAID plans to initiate trials of an antiviral agent in babies who were infected congenitally with cytomegalovirus. Also, an epidemiologic study will be undertaken to determine the following: how often an infected mother who has no symptoms of disease sheds virus; how easily she can transmit the virus to her baby; and the percentage of infected babies who develop disease. Data from these studies will have an impact on future strategies for prevention and therapy of these infections.

Influenza

The NIAID is active in supporting research on influenza and its complications. Advances in the understanding of the molecular properties of the proteins of influenza viruses have opened new avenues of investigation to develop improved vaccines and therapies. A promising antiviral drug, rimantadine, which was evaluated in a series of clinical trials supported by the NIAID, has been submitted to the FDA for approval as a licensed treatment of influenza. Marketing of this drug is expected to occur prior to the next influenza season. It is anticipated that this antiviral drug, which has fewer side effects than amantadine, will greatly improve the treatment and prevention of influenza.

Transplantation

One of the most urgent clinical needs is the development of technologies to improve the rate of success of bone marrow transplantation. This modality offers the greatest promise for the treatment of a number of life-threatening immunologic and malignant disorders. Clinical trials to be conducted by NIAID will employ various strategies for treatment of donor bone marrow and/or recipient subjects in order to minimize rejection, graft versus host disease, and recurrence of the original leukemic process. In order to plan these coordinated clinical trials, preclinical information on the cellular and molecular mechanisms involved in the transplantation of bone marrow is being pursued.

Sexually transmitted diseases [STD's]

The NIAID continues its research efforts to prevent STD's. The development of vaccines to prevent syphilis, gonorrhea, chlamydia, and herpesvirus infections is actively being pursued by many laboratories supported by the NIAID. Much progress has been made in recent years in improving the understanding and knowledge about approaches to vaccine development to prevent these infections. For example, candidate herpesvirus type 2 live attenuated vaccines have been developed; and it is hoped that they will enter clinical trials within the next 2 years. Also, the structural biology and immunobiology of the gonococcus are now better understood, and these advances should facilitate the development of an effective and safe gonococcal vaccine.

The Committee is concerned with dramatic increases in sexually transmitted diseases in this Nation. The Committee is also aware of consistent evidence indicating that infection with a sexually transmitted disease, particularly those diseases which cause breaks in the skin, significantly increases risk of acquiring HIV infection. For the past several years the Committee has urged NIAID to increase research efforts on sexually transmitted diseases, but has been disappointed that significant increases have not occurred. The Committee again encourages the Institute to increase research efforts on STD's and their possible role in the development of AIDS.

While the Committee recognizes the serious public health emergency created by AIDS, it is also concerned about the serious health consequences of STD's, particularly for women and their babies. The Committee urges the NIAID to increase its efforts to stimulate more interest in STD research in non-AIDS related areas. CDC estimates that 13 million Americans acquire an STD each year, and the Committee believes that research efforts are currently inadequate to address these important diseases which are now also implicated as risk factors in AIDS.

Tuberculosis vaccine development

The Committee heard testimony concerning two very compelling needs in the area of tuberculosis [TB] prevention and diagnosis. Specifically, the existing TB vaccine appears to be inadequate, and the diagnostic test for the disease is much too slow, requiring some three weeks for definitive results. The Committee strongly urges the National Institute of Allergy and Infectious Diseases to consider these important problems, as it develops its future research priorities. Since tuberculosis affects millions of people world-wide, the creation of a better vaccine and faster diagnostic methods is clearly needed. The Committee believes that if the NIAID gives appropriate priority to this effort that a new TB vaccine can be developed in the very near future. The Committee directs that such an effort be undertaken.

Chronic fatigue syndrome [CFS]

The Committee understands that research at the National Institute of Allergy and Infectious Diseases has resulted in new knowledge which may lead to a better understanding of chronic fatigue syndrome [CFS], which until recently had been known as chronic Epstein-Barr virus syndrome [CEBV]. CFS is identified as a poorly defined symptom complex characterized by chronic debilitating fatigue and by a variety of other signs and symptoms including sore throat, lymph node pain, headache and myalgias.

The Committee notes that a recent public announcement by NIH identifies a possible link to chronic fatigue syndrome with the newly discovered, contagious, human herpesvirus-6 [HHV–6], sometimes called human B-lymphotropic virus-HBLV. Little is known as to how the virus is transmitted, how the virus is harbored in an individual, and what causes the virus to activate in some, but not in others. The Committee urges NIAID to continue to research efforts on chronic fatigue syndrome.

The Committee further notes that the disease was first identified around Lake Tahoe, NV, and much of the serological samples have been collected and stored at the University of Nevada Medical School. The Committee believes that this fact suggests Nevada as a logical location for additional research.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

1988 comparable appropriation	$632,676,000
1989 appropriation request	687,828,000
House allowance	623,087,000
Committee recommendation	690,653,000

The Committee recommends an appropriation of $690,653,000 for the National Institute of General Medical Sciences [NIGMS]. This is $2,825,000 more than the administration request and $57,977,000 more than the 1988 appropriation.

The NIGMS provides funding support for the most basic of the biomedical research program that fall within the purview of the NIH. The mission of the NIGMS is to promote the development of new scientific knowledge regarding the fundamental structures (for example, cells, proteins, and genes) and life processes (for example, movement of proteins from one cell to another) that underlie human health. The availability of such knowledge is of vital importance to the investigators supported by other NIH components, who are seeking both to gain an understanding of the precise nature of the biological defects that cause specific diseases and to develop effective new strategies for disease prevention, diagnosis, and treatment.

Research training

The NIGMS is the principal source of support for research training at NIH with regard to the multidisciplinary predoctoral (pre-Ph.D.) training of young investigators. The Institute's Medical Scientists Training Program, designed to develop a national cadre of clinically trained investigators with combined M.D./Ph.D. degrees, was identified by the Institute of Medicine as an important source of talent for AIDS-related research in structural biology. This program has been recognized as a vital source of well-trained physician-scientists, who are in short supply. The Minority Access to Research Careers [MARC] Program, administered through this Institute, is invaluable in addressing the problem of minority underrepresentation in the biomedical sciences.

Genetics

The primary role of the genes that all humans possess is to provide instructions for the manufacture of myriad proteins (including enzymes and hormones), which are responsible for performing thousands of essential biological functions—transmitting messages to the brain, for example. This role is critical because a single genetic flaw can result in the body's failure to produce the exact amount of a protein at the precise time for a given process to occur in proper fashion. The result of a simple error can be disastrous—mental retardation, kidney failure, cancer, loss of muscle control, and/or early death.

The NIGMS Genetics Program is the largest single Federal program providing targeted support for basic research concerned with the process of inheritance. The purpose of this program is to develop a better understanding of how genetic messages are encoded and decoded, with the long-range goals of developing ways to identify the nature and source of genetic errors and to correct them. The greatest success to date is evident in the area of disease detection and diagnosis. Basic research in genetics supported by the NIGMS was instrumental to the development of a genetic marker system that used DNA fragments (called RLFP's or restriction fragment length polymorphisms) to localize disease-associated genes to specific portions of human chromosomes. This technique—one approach to the process of gene mapping (identifying the precise chromosomal locations of both normal and disease-causing genes)—has subsequently been used as an essential component of methodologies for the successful diagnosis of a number of devastating diseases, including Huntington's disease and cystic fibrosis. Unfortunately, effective methods of gene therapy—the ability to repair or replace defective genes—are still years away.

Human genome initiative

The Committee has included extensive report language in the NIH overview section directing the establishment of an advisory panel on the human genome. This will be an interagency panel with industry representation to coordinate and lead the human genome initiative.

Mankind possesses an estimated 100,000 genes, each located at a particular site on 1 of 23 pairs of chromosomes and comprised of a series of four nucleic acids arranged in a particular order or sequence. Genetic disorders occur when a spelling error appears in these sequences, causing improper instructions to be transmitted to the body's protein manufacturing sites. Because of this, knowledge of genetic sequences is vital to gaining an understanding of the more than 3,000 genetic diseases known to afflict the population of the world, as is determining the specific sites of defective genes. Modern day geneticists have focused considerable effort on the dual tasks of gene mapping and gene sequencing (identifying the nucleic acid sequences of particular genes). Despite these efforts, only a small fraction of the human genome (the entire set of human genes) has been mapped and sequenced—primarily due to the labor intensive methodologies and subsequent high cost. To accelerate the pace of progress in this area, the Congress added $17,300,000 to the NIGMS appropriation in 1988.

Structural biology

Biomedical researchers have learned that the specific function of a given protein or other biological entity is determined, in large measure, by its three-dimensional structure. Obtaining information about such structures is a high priority within the biomedical research community. Taking advantage of recent advances in the sophistication of available tools and methods, NIGMS-supported investigators have made considerable progress in determining the structures of a wide range of proteins in precise detail. This includes a protein produced by the cancer-causing ras gene. The importance of such developments cannot be overstated, in that they are expected to eventually provide scientists with important new approaches to disease control—for example, allowing researchers to design therapeutic drugs capable of blocking the receptor sites used by viruses to link-up to host cells. As part of a special research effort, grantees of this Institute are currently seeking to determine the three-dimensional structures of several proteins involved in the occurrence of AIDS.

Cellular and molecular basis of disease

A significant portion of the NIGMS budget is allocated to fundamental research in cellular and molecular biology. While not targeted to specific diseases, investigations in this area are essential; they help to elucidate the mechanisms by which cells and their various component parts are supposed to work to perform their many life-sustaining tasks. This is illustrated by the recent discovery by Institute-grantees that microtubules, tube-shaped proteins, provide strength to cell structures and play a vital role in intracellular transport of proteins. Findings from research on nerve cells suggest that defective microtubules may be responsible for as many as a dozen known neurological disorders.

Pharmacological sciences

Dr. Donald Cram of UCLA, winner of the 1987 Nobel Prize in chemistry, is the fourth grantee of the NIGMS Pharmacological Sciences Program to be awarded this honor in the past decade—an indication of the importance of the work being supported by this program. Dr. Cram's award was for his research on host-guest chemistry. His discoveries have potential application to the design of artificial enzymes, as well as to the development of antibodies capable of attacking foreign substances in the body.

Biotechnology

Basic research in genetics, supported by the NIGMS and other NIH components, resulted in the development and improvement of recombinant DNA techniques that lie at the heart of America's new biotechnology industry. Currently, there are an estimated 1,300 biotechnology firms in the United States, employing over 40,000 workers, and these firms have an estimated sales volume of $750 million per year. The NIGMS prepared and submitted to the Committee a special report during the past year, detailing the continuing role of this Institute, and the NIH as a whole, in assuring the development of this new industry. In March 1988, as a followup to this report, the NIGMS convened a meeting of scientists involved in the operation of State, university, and industrial biotechnology research centers, to address the growing need of the American biotechnology industry for specially trained personnel, and how these needs might be satisfied.

The Committee has directed the NIH to establish a biotechnology policy board which is discussed in greater detail in the NIH overview section.

Biotechnology research training

The current U.S. advantage in the competitive arena of biotechnology research and product development is built on the large U.S. investment in the biological sciences. Biotechnology techniques were developed through NIH-sponsored research and the National Institutes of Health continue to fund the majority of Federal biotechnology-related research.

But the competitive advantage that the United States has enjoyed is now being challenged as Europe and Japan close the gap in funding through coordinated national strategies.

While much progress has been achieved in the development of biotechnology therapies and products, a number of crucial research areas have been identified. These are bottlenecks to further development of products and therapies arising from basic research. The enormous growth of the biotechnology industry has also resulted in a shortage of expert personnel in those fields, including biochemical engineering, macromolecular structure, protein engineering, and immunogenetics. There is also an increasing demand for bioscientists trained in more classical areas such as microbial physiology, microbial ecology, enzymology, pharmacology/toxicology, physiology, virology, biological chemistry, and cell biology, areas needed to assure that products developed commercially are safe, effective, and appropriately used as they are brought to market.

A number of recent surveys identified an immediate need of from 1,000 to 1,500 biotechnology trainees in a number of these areas. The Industrial Biotechnology Association reports that industry personnel needs will increase 23 percent by mid-1988 over last year's number, and 44 percent by June 1989.

Scientists needed for the expanding biotechnology industry are currently being drawn from a very limited and shrinking pool of trained individuals. This situation will result in shortages in Federal laboratories and an inadequate supply of academic scientists needed for regular faculty replacements. A consideration of industry and academic needs, which are enhanced by the large number of faculty members expected to retire over the next decade, clearly reveals the critical importance of enhancing biotechnology research training programs. Such programs must be adequate to accommodate the increasing personnel needs of the academic, industrial, and government sectors.

A recent panel of university, industry, and Government scientists, brought together by the NIGMS in responses to the Committee's request, reached the following conclusions: (1) There is a major national need for biotechnology research training programs, which should be targeted toward the goal of increasing the national pool of trainees/fellows by about 1,500, adding training candidates at the rate of about 250 per year; (2) Awards for biotechnology research training should be provided for 5 years, with competitive stipend levels; and (3) $4,825,000 for 250 trainees should be provided in fiscal year 1989, increasing to support 1,500 trainees by the fifth year.

The Committee, therefore, directs that NIGMS undertake a new biotechnology-based research training program focusing on the applications of engineering, physics, chemistry, mathematics, and biology to interdisciplinary biomedical research training. $4,825,000 has been included for 250 trainees to include individual, predoctorate fellows; individual postdoctorate fellows; and special service fellows selected from the ranks of senior scientists trained in one field who would cross train in a new discipline. The Committee intends that this program should grow each year until in the fifth year of the program 1,500 American scientists are in training.

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

1988 comparable appropriation	$396,811,000
1989 appropriation request	418,388,000
House allowance	407,650,000
Committee recommendation	431,388,000

The Committee recommends an appropriation of $431,388,000 for the National Institute of Child Health and Human Development [NICHD]. This is $13,000,000 more than the administration request and $34,577,000 more than the 1988 appropriation.

The NICHD is the focal point at NIH for research pertaining to the health problems of mothers and children, for understanding human development and reproduction, and for studying population growth and trends. The NICHD research program targets some of the problems of greatest importance and concern to our society. These include infant mortality, birth defects, mental retardation, pediatric and maternal AIDS, learning disabilities, development of new or improved contraceptive methods, adolescent pregnancy, and childhood accidents and injuries.

The Comittee has added additional funds to reduce downward negotiations and to help avoid the need to eliminate centers.

The Committee was pleased to learn that NICHD has been working closely with the National Center for Nursing Research in the development of the multicenter network of maternal-fetal machine units.

The Committee encourages the Institute to pursue research into the best methods of treatment of infants who are born addicted to cocaine because of the drug abuse of their mother. The Committee understands that these infants have unique medical problems that health care professionals are sometimes unable to address.

Low birth weight initiative

Since its establishment in 1962, a primary goal of the NICHD has been to reduce the Nation's infant mortality rate. While there has been a dramatic drop in infant mortality over the past 25 years, the rate of decline has slowed. The critical factor in further reducing infant mortality is the prevention of low birth weight. Babies born weighing less than 5½ pounds face the highest risk of dying or suffering life-long disability. Thus, the Institute has launched a major research initiative to cut the Nation's high incidence of low birth weight and infant mortality. As part of this initiative, the NICHD supports biomedical and behavioral research on such factors as the initiation of labor, control of fetal growth, maternal cigarette smoking, nutrition, prenatal care, strategies to discourage teenage pregnancy, and family planning issues such as spacing of pregnancies.

Two new clinical trials are the most recent additions to this initiative. One is designed to determine the best strategy for managing pregnancy that goes more than 10 days beyond its expected due date, and the other is assessing the prophylactic use of aspirin to prevent hypertension during pregnancy.

Premature labor

Low birth weight, due in large part to women going into labor too soon, is the major contributor to this Nation's high infant mortality rate. The Committee has heard testimony from NICHD and others that despite research, the cause of most cases of premature labor remains unknown, and the ability of physicians to prevent or stop it remains limited. The efforts of NICHD to foster research on this topic, including basic research on the mechanism of onset of labor, centers studying low birth weight and premature delivery, and the nature of maternal-fetal medicine units for clinical trials in obstetrics, represent important steps in increasing our knowledge. However because of the importance of this problem, the Committee is eager to enhance these efforts, and accordingly has provided an additional $3,500,000 for expanded research on premature labor.

Birth defects

Research to conquer diseases or disorders that prevent children from reaching their full physical or intellectual capacity has high priority at the NICHD. In a major advance, NICHD-supported scientists have discovered the protein responsible for the specific muscle defect associated with Duchenne muscular dystrophy, a fatal muscle wasting disease associated with mental retardation. Identification of this missing protein may be the key which allows scientists to develop a treatment for this disorder.

Vaccine development

Typhoid fever, pertussis (whooping cough), and Haemophilus influenzae type B still extract a huge economic and human toll around the world. For example, Haemophilus influenzae type B is the leading cause of preventable mental retardation, and pertussis is still a problem in many countries and is again emerging as a public health problem in the United States because of consumer fears about the safety of the currently available vaccine. NICHD scientists are now developing new, more effective, and safer vaccines against these illnesses. A large field trial testing the safety and effectiveness of a new typhoid fever vaccine has been concluded in Nepal, bringing that vaccine a step closer to market approval. Human clinical trials are under way for new vaccines against pertussis and Haemophilus influenzae type B and the results thus far are very promising.

New antibiotic

An NICHD scientist, noticing the lack of infections in frogs living in murky aquariums, has uncovered a previously unknown way that frogs, and probably humans, protect themselves against infections. In the laboratory, these protective substances, named magainins, kill a broad spectrum of bacterial pathogens, viruses, fungi, and parasites. Studies are underway to determine whether magainins are effective in fighting human disease. If they are, a powerful new family of antibiotics will have been discovered.

Childhood injuries

Since ensuring the health and well-being of children is an integral part of the NICHD mission, research into mechanisms and antecedents of childhood accidents with a goal of preventing injuries is a high priority at the Institute. Several studies are now under way as part of the NICHD injury prevention research plan, developed at the request of Congress. They include studies on the role of family stress in childhood accidents, assessment of the accuracy of parental information on home hazards and the relationship between home hazards and childhood injuries, and evaluation of whether parents' perceptions of risk to their young children is a major determinant of how parents organize their physical environment and pattern their behaviors to minimize the risk of accidents.

Learning disabilities initiative

The Committee is pleased to note that, under the leadership of the NICHD, the National Institutes of Health have responded promptly to this Committee's guidance, provided in the fiscal year 1988 Committee report, regarding implementation of the recommendations of the report to Congress of the Interagency Committee on Learning Disabilities [IACLD]. The Committee is aware that NICHD has continued to convene the Federal agency members of the IACLD to review progress toward implementing its report to Congress and that NICHD, together with NINCDS, has issued a request for proposals to establish at least four new interdisciplinary centers for research on learning disabilities.

Community integration of individuals with mental retardation

With a decrease in the number of individuals with mental retardation living in large institutions, there is a growing interest in better understanding their integration into community settings. The National Institute of Child Health and Human Development [NICHD] recently issued a request for proposals to study families of retarded children and adults. The Committee is pleased to learn that the response of the research community was excellent and five grants were funded. This research initiative will provide important information on how families of mentally retarded children and adults develop social support networks, how much time and resources are allocated to the mentally retarded child, and what happens to individuals with mental retardation as they age. The NICHD is currently funding programs which train scientists to conduct research on issues that have arisen with the return of individuals with mental retardation to their families and their communities. This effort is especially important because individuals with mental retardation may have physical and emotional disabilities which make community integration difficult. Recent advances in bioengineering have decreased health problems and improved the quality of life of individuals with mental retardation. The Committee encourages NICHD's continuing interest in developing this area of growing importance to individuals with mental retardation and their families. The Institute is currently spending $3,900,000 directly on community integration research, and in addition, approximately $1,000,000 to support research related to this important field. The Committee urges continued expansion of this effort.

Contraceptive development initiative

The NICHD supports a broad range of research, ranging from basic reproductive biology to testing of specific agents for contraceptive properties, to generate the knowledge base required to develop new, more effective, safer contraceptives. The NICHD is currently conducting clinical trials on Capronor, a biodegradable implant for women that provides protection from pregnancy for up to 1 year. A second new contraceptive device—the cervical cap—has been extensively tested by NICHD and is expected to receive FDA approval soon.

Perinatal AIDS

At the NICHD, AIDS-related research focuses on pregnant women and their infants. HIV infection and AIDS are increasing among this population, particularly among women who are intravenous drug users or the sexual partner of an IV drug user. NICHD AIDS research is directed at the transmission of HIV from mother to child, the effect of the AIDS virus on pregnancy and fetal and child development, assessing the effectiveness of prophylactic treatment to prevent opportunistic infections in HIV-positive children, developing treatment regimens for children with AIDS, and methods to prevent the sexual transmission of HIV.

The NICHD developed a simple blood test that is now being used in a nationwide study conducted by the Centers for Disease Control, in collaboration with the NICHD, to determine the prevalence of HIV antibodies among women of childbearing age by screening newborns. NICHD intramural scientists have developed a mouse model to help determine what factors turn latent HIV infection into an active disease, and other intramural scientists are trying to ascertain how HIV neutralizes or inactivates T-cells. This is an important step to developing effective therapies against AIDS.

The Committee has included an additional $2,000,000 beyond the President's request for AIDS research at the NICHD. The Committee understands that the NICHD has been working on the development of a definitive diagnostic test for HIV infection in infants. The Committee recognizes the importance of this test to identifying appropriate treatments for pediatric AIDS and believes the NICHD should continue its efforts in this area.

The Committee also recognizes the importance of placental transfer research and expects the NICHD to expand its efforts in this area with the additional funds.

Finally, the Committee expects that all such research efforts will be carefully coordinated with any related NIAID AIDS research, particularly in the area of the clinical trial networks.

Mental retardation centers

The Committee understands that 10 of the 44 centers supported by NICHD are scheduled to be recompeted in fiscal year 1989 and that the President's budget includes funding for only 41 centers and assumes that those 41 remaining centers would be involved in negotiated reductions of approximately 17 percent. Three of the 10 centers up for recompetition are mental retardation centers.

The Committee has added $3,500,000 to insure the continuation of 12 mental retardation centers and other centers up for recertification or renewal and for the purpose of reducing the centers' necessary rate of downward negotiations.

Sudden infant death syndrome [SIDS]

The Committee continues to be concerned about sudden infant death syndrome [SIDS] and encourages the effort of the National Institute of Child Health and Human Development [NICHD] to expand its research on this tragic disorder. Of particular interest is the planned use of the Institute's networks of neonatal intensive care units and maternal-fetal medicine units to obtain data regarding SIDS incidence and relationship to maternal-fetal conditions, labor and delivery events, neonatal apnea, physiological and neurological examinations, and followup of low birthweight babies.

The NICHD's plans to increase its SIDS research activities are especially important since there appears to be an increase in the incidence of SIDS, particularly in certain geographic areas. While improved reporting activities can account for some increase in SIDS incidence data, it is troubling that several States on the west coast, particularly Oregon, have rates which are among the highest in the Nation. The Committee is pleased to learn that the NICHD is taking steps to address this issue in the effort to expand its SIDS research activity.

The Committee is aware that a NIH consensus development conference on "Infantile Apnea and Home Monitoring" identified the need to conduct a prospective controlled study of the use of monitoring on specific at-risk populations. The Committee has therefore included an additional $5,000,000 to initiate such an effort. The Committee also requests that NICHD prepare and submit to the Committee a report detailing a 5-year SIDS research plan. It is requested that this report include a discussion of promising research areas both underway and planned. The Committee requests that the report be provided by February 1, 1989.

Training of behavioral scientists

The Committee is pleased with the work of the NICHD, particularly in the area of prevention and treatment of mental retardation and related disabilities. Research conducted at the NICHD Mental Retardation Centers has resulted in significant scientific advances aimed at reducing the incidence of brain injury in children caused by accidents and other events which can be prevented. Accidents continue to be perhaps the single most important hazard for children and adolescents and NICHD is strongly urged to make this a priority area. The Committee believes that an insufficient number of behavioral scientists are being supported by the Institute to study disabling conditions associated with mental retardation and treatment approaches. Because mental retardation is a behavioral condition affecting cognitive and social development, the Committee feels that more behavioral research is needed to develop new strategies in the area of treatment prevention, and the amelioration of related disabilities. It has also been brought to the Committee's attention that an inadequate number of behavioral scientists are being trained by the Institute to study other important issues including learning disabilities, sexual behavior, non-parental daycare, and in particular, adolescent health problems.

Further, despite funding increases over the past 7 years in the overall research training budget, support for training of behavioral scientists throughout the Institute is only one-fifth of the support made available to trainees in the biomedical sciences. This, in conjunction with the normal attrition of older scientists, has resulted in a progressive decline in the number of young trained behavioral scientists in this important field of research. The Committee therefore strongly urges the NICHD to increase the number of behavioral research training grants in order to begin to restore a balance in training opportunities.

Sexually transmitted diseases

The Committee is concerned about the impact of sexually transmitted infections on women and their babies. The Committee urges NICHD to increase its research efforts on the effect of sexually transmitted diseases on fertility and on maternal and child health, and on the effectiveness of contraceptive methods in the prevention of sexually transmitted diseases.

Behavioral science research

The Committee is pleased with the work of the NICHD, particularly in the area of prevention and treatment of mental retardation and related disabilities. Research conducted at the NICHD mental retardation centers has resulted in significant scientific advances aimed at reducing the incidence of brain injury in children caused by accidents and other events which can be prevented. The Committee believes, however, that an insufficient number of behavioral scientists are supported by the Institute to study disabling conditions associated with mental retardation and treatment approaches. Because mental retardation is a behavioral condition affecting cognitive and social development, the Committee feels that more behavioral research is needed to develop new strategies in the area of treatment, prevention, and the amelioration of related disabilities. It has also been brought to the Committee's attention that an inadequate number of behavioral scientists are trained by the Institute to study other important issues including learning disabilities, sexual behavior, and nonparental daycare. In fact, despite funding increases over the past 7 years in the overall research training budget, support for training of behavioral scientists throughout the Institute is only one-fifth of the support made available to trainees in the biomedical sciences. This, in conjunction with the normal attrition of older scientists, has resulted in a progressive decline in the number of young trained behavioral scientists in this important field of research. The Committee strongly urges the NICHD to increase the number of behavioral research training grants to begin to restore a balance in training opportunities.

NATIONAL EYE INSTITUTE

1988 comparable appropriation	$224,947,000
1989 appropriation request	233,968,000
House allowance	228,235,000
Committee recommendation	234,218,000

The Committee recommends an appropriation of $234,218,000 for the National Eye Institute [NEI]. This is $250,000 more than the administration request and $9,271,000 more than the 1988 appropriation.

The NEI conducts basic and clinical research aimed at improving the prevention, diagnosis, and treatment of visual disorders, many of which end in blindness. Results from this research improves the quality of life for millions of Americans and results in considerable savings to the Nation.

Clinical trials

Due to advances in neonatal care an increasing number of low birth weight infants survive. However, each year approximately 23,000 of these babies have some degree of eye damage and 650 are blind from retinopathy of prematurity [ROP]. Recent findings of a multicenter clinical trial show that freezing a portion of the back of the eye can prevent severe visual loss from ROP in about 50 percent of these premature infants.

Molecular genetics

The isolation, cloning, and sequencing of a gene, the absence of which causes retinoblastoma, has made it possible for NEI-supported scientists to design a simple blood test that will predict which infants in high-risk families will develop this disease. As a result, children who do not have the defective gene can be spared repeated examinations and their parents are assured that they will not develop this childhood cancer.

Glaucoma

An accumulation of fluid in the eye compressing the optic nerve may be one reason for vision loss in glaucoma. The NEI is encouraging scientists in the fields of molecular biology, cell biology, immunology, and epidemiology to address the multiple problems associated with this disease. Research on the cell and molecular aspects of fluid transport systems within the eye will be conducted to better understand the mechanisms which lead to vision loss.

Education

Last year the Committee urged the Institute to increase its activity in the dissemination of research advances in the fields of glaucoma and diabetes. In response, a National Eye Health Education Program is being developed to educate professionals and the public about the importance of prompt and appropriate eye care. Initially, early detection and treatment of glaucoma, and laser treatment for the ocular complications of diabetes will be emphasized.

The Committee is pleased that the NEI has launched a comprehensive education program to inform and motivate the American public and health professionals of the sight-saving potential of detection and early treatment of glaucoma, diabetic retinopathy and other eye diseases. The Committee notes that only 2 positions of the 10 which the Committee provided last year have been allocated and the remaining slots are to be made available during fiscal 1989 to fully initiate this priority public-education program. Given the importance of eye health education, the Committee strongly believes additional positions should be allocated to the National Eye Institute as stipulated in report language accompanying the fiscal year 1988 appropriation. An additional $250,000 is provided to support implementation of this initiative.

Low vision

A significant number of Americans although nearly blind retain some residual vision. Helping these people use their remaining sight is an important goal of the Institute. Scientists are taking advantage of the rapid advances in technology to construct practical noncumbersome vision aids. Such devices will help these patients lead more independent and productive lives.

AIDS

The NEI is initiating multicenter clinical and epidemiological studies on the ocular complications of AIDS. Projects aimed at understanding the virology, immunology, and molecular biology of ocular complications of AIDS, as well as a search for drugs effective in the treatment of AIDS-related retinitis are under way.

Corneal disease

Herpes simplex virus, the causative agent for an extremely painful chronic infection of the eye, is responsible for most corneal blindness stemming from infection in this country. Scientists have succeeded in isolating a region of the viral genome responsible for a several millionfold increase in the ability of this virus to spread within the central nervous system of infected animals. Studies are under way to develop methods of controlling virus activation and to develop a vaccine that would provide lifelong protection against such infection.

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

1988 comparable appropriation	$215,666,000
1989 appropriation request	223,168,000
House allowance	216,985,000
Committee recommendation	223,168,000

The Committee recommends an appropriation of $223,168,000 for the National Institute of Environmental Health Services [NIEHS]. This is the same as the administration request and $7,502,000 more than the 1988 appropriation of $215,666,000.

The NIEHS conducts and support research to explore health effects of environmental agents. The effects these agents cause include most human diseases and dysfunctions. NIEHS research findings alert other scientists, physicians, the general public, legislators, and regulatory agencies to the existence of hazardous environmental agents so that individuals and those charged with protecting the public health may access the potential risk and take steps to protect human health and safety.

Lead

New evidence of the subtle, yet serious adverse effects of lead on the mental development of babies born to women with blood lead levels heretofore considered safe were reported in a recent study. Another study revealed that very low levels of lead exposure to young children can adversely effect the nervous system. These findings are important because they suggest that much more work must be done to protect women and children from environmental lead, and emphasis must be given to the fact that environmental agents can have powerful, but subtle, effects which can only be uncovered through basic laboratory research coupled with environmental epidemiology.

Air pollution

New research data from NIEHS-supported studies frequently have application to emerging environmental health problems. The six city air pollution study conducted by Harvard University provides the best available information about the dangers of uncontrolled air pollution. The methods and techniques developed for this research are now being used in the study of potential health effects from acid rain. However, there are instances where the effects of an unrecognized hazard such as radon contamination in homes cannot be adequately judged from existing knowledge. Therefore, the NIEHS should initiate research studies to determine the health effects of radon found in homes.

Toxicology studies

The toxicology studies conducted by NIEHS continue to identify potential human health hazards from among the many compounds to which we are exposed. These studies more frequently lay concern to rest. For example, the commonly prescribed antibiotic tetracycline was found not to have any significant toxicity in a carefully controlled NIEHS study in rodents. However, the pesticide dichlorvos, which had been widely used both in the home and by agriculture, showed evidence of carcinogenicity in both rats and mice.

Future issues

History is replete with examples of improvements in the quality of life which have associated ill effects. The NIEHS recently convened a group of scientists with a broad range of expertise and experience to look into the future to forecast technologies and trends, and to predict possible concomitant environmental health problems and issues. The Committee requests a report by February 1, 1989 on the conclusions of this conference.

Research facilities

The NIEHS described a plan to consolidate its research and support activities in a single facility upon the expiration of its current lease for rented space. This plan is consistent with a need for facilities and equipment appropriate for the conduct of basic biomedical research.

NATIONAL INSTITUTE ON AGING

1988 comparable appropriation	$194,746,000
1989 appropriation	205,222,000
House allowance	202,096,000
Committee recommendation	225,578,000

The Committee recommends an appropriation of $225,578,000 for the National Institute on Aging [NIA]. This is $20,356,000 more than the administration request and $30,832,000 more than the 1988 appropriation.

The research and research training programs of the NIA are designed to increase knowledge and provide a better understanding of the biological, medical, behavioral, and social processes of aging and the problems and needs of older people. The NIA also utilizes public information and education programs to disseminate the findings of this and other relevant research.

The Committee has been impressed with the recent progress in instrumentation that can measure and resolve hundreds of components of brain chemicals (neurotransmitters) in one measurement. Significant breakthroughs in measurement technology for the first time allow medical science the capability to map the brain's chemistry at a single point in time by determining a profile of several hundred neurotransmitters. The Committee is aware of research efforts that are taking place to study this and encourages the continued development of this important technology.

The Committee again urges NIA to support pre- and postdoctoral research fellowship awards for qualified nurses. The Committee further remains very interested in having the NIA take the lead in exploring various clinical applications of biofeedback, and if appropriate, through a consensus development conference.

Alzheimer's disease

Alzheimer's disease [AD] is a major and very costly health crisis in our Nation, currently affecting between 2.5 and 4 million older persons. According to the Office of Technology Assessment, unless a cure or effective treatment is found, the number of victims will more than triple within the next 50 years. The Committee is pleased to note, however, that within the past year a number of exciting advances have been made. For example, nerve growth factors have been found to stimulate the growth of nerve cells in the brains of animals—cells of the type which are mainly lost in AD. There is the real prospect, when certain technical hurdles are crossed, that nerve growth factors may be effective in restoring or improving nerve cell function in those afflicted with this disease. Another recent finding is that Alzheimer-like lesions have been produced in cell cultures from skin biopsies of AD victims, but not in similar cultures of skin cells from normal subjects. This holds promise for more accurate diagnosis in living patients and opportunities for understanding the disease process.

Research is currently being supported on potentially promising treatments for AD, one of which is the drug tetrahydroaminoacridine [THA] which may prove to be an effective treatment of memory loss. A major clinical trial is now evaluating both the safety and effectiveness of THA in the treatment of AD. In addition, the NIA has initiated steps to establish a national Alzheimer's Disease Education Center as a clearinghouse to gather, maintain, and disseminate information about AD, both to scientists and to family caregivers.

Meeting the challenges of Alzheimer's disease

The Committee notes that the professional judgment budget for Alzheimer's would add $43,800,000 to the administration's request of $109,397,333 for Alzheimer's for all Department of Health and Human Services agencies. To that amount, the Committee has targeted an additional $20,356,000 to the NIA and $2,100,000 to the National Center for Nursing Research to mount a more serious challenge against a disease that is costing society more than $48,000,000,000 annually. The Committee has added these funds in eight areas:

Research centers.—$4,500,000 has been added for three new Alzheimer's disease research centers [ADRC], bringing the total number of centers to 15. The Committee urges that in the selection of center locations, special consideration be given to areas of the country with a high concentration of the elderly and incidence of Alzheimer's. The Committee is pleased with the progress of the ADRC program and urges NIA to strengthen the centers' role, not only in research, but also in providing specialized training for health care providers in their surrounding region.

Leadership research grants.—$2,000,000 has been added for two additional leadership and excellence grant awards to senior investigators who have distinguished records in biomedical research on Alzheimer's disease. Among other things, these awards will permit senior investigators to devote time to the development of outstanding junior biomedical investigators interested in Alzheimer's and the related dementias associated with aging.

Training.—$1,500,000 is provided to support an expanded training effort through the ADRC program. Funds will be used to support training for junior investigators and the full range of care providers including social workers, nurses, home health aides, homemakers and those with primary responsibility for care. The sum of $600,000 has been provided to the Center for Nursing Research for this purpose.

Shared (tissue bank) research facilities.—To help enhance current research capabilities, the Committee has added $1,000,000 for the support of facilities which would collect, document and distribute well-characterized tissues from familial AD patients.

Pursuing leads into the cause of Alzheimer's.—$4,356,000 is provided to pursue promising leads into the cause of Alzheimer's, including two particularly exciting areas regarding the effects of infections and of toxins on the aging nervous system.

Recently, scientists have found that the aging nervous system may be particularly vulnerable to a host of insults such as infections and environmental toxins. Normal barriers in the brain infections and toxins appear to be altered during both normal and pathological aging. These events may predispose the aging nervous system to increased risk of infections and to intrinsic and extrinsic toxins.

Developing better diagnostic techniques.—$3,000,000 is provided for developing better diagnostic techniques. Current research findings indicate the potential for biochemical diagnostic tests for Alzheimer's disease based upon the detection of specific biological markers. Most of these can be performed only on postmortem tissues. There is a need to search for antemortem diagnostic biochemical markers for Alzheimer's disease, especially for the early stages of the disease when potential interventions would be most effective.

Burden of care.—$1,000,000 has been added to NIA for burden-of-care research and $1,500,000 has been added to the Center for Nursing Research [CNR] also for this purpose. The Committee directs that NIA and CNR work closely and collaboratively in developing a burden-of-care research strategy for Alzheimer's patients and their family members, friends, and neighbors who care for them.

Most Alzheimer's disease patients receive care from their family members, friends, and neighbors. Research must be expanded on the social and behavioral aspects of care of AD patients including: the impact of AD on families, support networks, and formal health care systems; help seeking behavior and social and behavioral treatment responses; social, behavioral technological, and environmental interventions in caring for AD patients and reducing caregiving burdens; forecasting long-term care demands for AD care and the economic implications. The effort on these issues that the NIA is currently supporting is not commensurate with the need.

Cross-cultural studies.—$2,000,000 is provided to further develop scientifically sound international and cross-national studies. Differences in incidence rates among countries, in distinct subpopulations or by acquired characteristics may yield clues about risk factors which might then lead to new hypotheses about etiology.

Testing new drugs.—$1,000,000 is provided to test promising new drugs and other therapeutic agents which show significant scientific promise. New therapeutic strategies are being designed which accommodate the diverse neurochemical deficits seen in the AD population by restoring the functional integrity of a number of affected systems. Since the principal pathological changes in AD may involve neuronal membrane constituents and the functioning of cytoskeletal organelles, new treatment strategies will focus on developing pharmacological agents which maintain the integrity of these elements of a nerve cell. The possibility of even a short extension of normal and productive life of both the AD patient and his/her family is very important. The search for other treatments for AD needs to continue as a high national priority.

Molecular genetics

Molecular genetic techniques (such as recombinant DNA, gene cloning, and DNA sequencing) are proving valuable for investigations into the mechanisms of aging and the genetic basis for differences in aging. These techniques are providing the opportunity to isolate and identify genes responsible for the onset of age-related diseases, such as familial AD.

Long-term care and oldest old

Research studies in the field of long-term care have documented the nature of care needs in an increasingly older population, and have shown that social and behavioral factors interact with biomedical factors in determining the use of long-term care. These studies have also shown that non-medical interventions can aid families in caring for older relatives at home, and that modifications in institutional arrangements can improve the functioning of institutionalized older people. Current research and special initiatives are focusing attention on long-term care needs and the effectiveness of health care services and informal supports.

International studies

International and cross-cultural studies are offering a mechanism for exploring the relative effects of genetic, cultural, and environmental factors on the aging process and the diseases of aging. For example, rates of AD, vascular dementia, and osteoporosis seem to vary dramatically by nation and ethnicity, with apparently lower rates of AD in Japan, China, and possibly certain African nations. The NIA is currently investigating opportunities for involvement in research on dementia and other diseases of aging among individuals of Japanese ancestry in Japan and the United States. The combinations of developed and developing countries in and around the Pacific basin, and in Latin America, are viewed as attractive opportunities for similar research. The initial research priorities of the NIA-based Special Program for Research on Aging with the World Health Organization are the epidemiological aspects of aging, age-associated dementias, aging and immune function, and nutrition in aging with special emphasis on osteoporosis in developing and developed countries.

The Committee remains supportive of the efforts of NIA to work collaboratively with the Agency for International Development in order to foster an appropriate international aging research agenda.

Research on nutrition, exercise, and behavioral factors

Specific lifestyle and behavioral factors are known to be major determinants of maintaining good health in later years. Increased research is being conducted on the characteristics of good nutrition in older people, the specific benefits of exercise programs, and on the social and behavioral factors in health promotion of these two important aspects of health maintenance in older people.

Research training

The NIA continues to place a high priority on supporting a variety of training opportunities to help individuals prepare for or advance their careers in research and teaching in geriatrics and all aspects of aging research. The Institute of Medicine [IOM] workshop on leadership for geriatric medicine has reported more funds for training and research in gerontology and geriatrics are essential to increase the science base and to encourage the development of knowledgeable faculty. IOM further recommended that the training be multidisciplinary in nature. In response to these recommendations, the Committee has provided sufficient funds for the NIA to establish up to two centers of excellence for research and training in geriatrics in fiscal year 1989. The Committee understands that the NIA has initiated discussions with HRSA regarding the creation of these centers and expects the NIA to continue to coordinate its efforts with HRSA, the agency responsible for training physicians in geriatric care and treatment.

The Committee was pleased to note the National Institute on Aging's response to the Committee's request for updated information on the rural elderly. The Committee remains concerned, however, at the lack of ongoing, comprehensive research on the elderly in rural areas, which comprise nearly one-third of our Nation's elderly population. The Committee, therefore, requests that the National Institute on Aging continue to collect and analyze data on rural elderly.

Hearing and sensory impairments

The Committee is pleased at the work being done at NIA on sensory issues and the aging, particularly hearing loss and speech comprehension. Approximately 30 percent of adults aged 65 to 74 and more than 509 percent of those over the age of 75 experience hearing losses associated with the normal aging process. The large number of elderly people affected suggests that hearing loss and reduced speech comprehension are among the most common disabilities of older Americans. Further, the expanding size of our aging population is cause for increased concern about age-related hearing loss and the special needs and problems of the elderly in this area. The Committee continues to support the investigations being done by NIA into the behavioral, neuropsychological, anatomical, electrophysiological, and biochemical changes in these sensory systems during normal aging and urges its expansion. The Committee also notes a critical need for further research into the psychosocial consequences of hearing and sensory impairments, such as loneliness, isolation, and decreased self-esteem that results from a deceased ability to understand speech. Research in this area will supplement existing research initiatives on coping with chronic illnesses and disabilities.

Aging and mental retardation research

The Committee believes the NIA should consider conducting studies in the area of the social gerontological aspects of aging and mental retardation, as well as the biological and psychological aspects of the aging process among individuals with mental retardation and related conditions.

Rural elderly

Congressional concern about the problems of rural America has grown, especially on the issue of access to health care and social services by the elderly living in rural areas. Increased research attention should be focused on (*a*) the assessment of the health and social needs of the rural elderly and on the impact of those needs on the communities where they live, and (*b*) the development of models of health care and social/psychological support to respond to these needs, applicable to rural and other areas of the country. The Committee believes that research covering rural as well as urban elderly populations concerns must be expanded and understands that NIA shares in this goal.

In order to move this research agenda more rapidly, the Committee believes NIA should report to the Committee on the need to establish a rural center for aging population studies to examine these issues in a systematic way and, based on this research, develop models for improved health care and social support.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES

1988 comparable appropriation	$147,679,000
1989 appropriation request	158,931,000
House allowance	156,174,000
Committee recommendation	161,931,000

The Committee recommends an appropriation of $161,931,000 for the National Institute of Arthritis and Musculoskeletal and Skin Diseases [NIAMS]. This is $3,000,000 more than the administration request and $14,252,000 more than the 1988 appropriation of $147,679,000.

The NIAMS plans, supports, and conducts basic and clinical research and research training on the many forms of arthritis, musculoskeletal and skin diseases, as well as research on the normal structure and function of joints, muscles, bones, and skin.

The Committee is well aware of the fact that the percentage of approved grants which are funded by the National Institute of Arthritis and Musculoskeletal and Skin Diseases is substantially lower than the average percentage for the other NIH institutes and, in fact, is the lowest at the NIH. The Committee has recommended additional support for this institute in order to address this issue.

Rheumatoid arthritis

The NIAMS continues to pursue the theory of a possible connection between rheumatoid arthritis and a virus or bacterium acting as a triggering agent in genetically disposed individuals. The Institute recently issued a program announcement encouraging additional research on the potential role of infectious agents in causing rheumatoid arthritis. The Committee has added $1,000,000 to fund this additional research. The Committee urges the Institute to conduct clinical trials of the antibiotic treatment of rheumatoid arthritis at multiple sites over a 5-year time period.

Juvenile arthritis

Arthritis affects more than 165,000 children per year in this country. Its onset can begin at any age and joint stiffness, pain, fever, rash, heart involvement, and slowing of growth are among many problems associated with the many forms of this disease. More recently, researchers have found that juvenile arthritis is associated with several tissue type antigens; potentially linking juvenile arthritis to genetic factors. This new information demands further research into factors associated with genetic susceptibility. The Committee strongly encourages the NIAMS to commit more of its resources into this area of research for juvenile arthritis.

Osteoporosis

The NIAMS continues to emphasize osteoporosis research. The Institute awarded three specialized centers of research in osteoporosis and, in collaboration with the NIA and the NIDDK, initiated Programs of Excellence of Research on Osteoporosis. It was discovered for the first time that bone cells contain receptors for estrogen. Researchers have now established that estrogen treatment in postmenopausal women can protect against hip fractures in later years.

Lyme disease

Substantial progress has been achieved in understanding the cause, mode of transmission, and treatment of Lyme disease. The joint lesions of Lyme disease appear very similar to those of rheumatoid arthritis. These similarities provide a model for investigations of how an infectious agent can cause chronic arthritis.

Systemic lupus erythematosus

Scientists are continuing to attack lupus on a number of active fronts. A newly discovered antibody, anti-P, has been found in lupus patients with psychosis, but not in other lupus patients or normal controls. Last year, the NIAMS convened and chaired the Lupus Erythematosus Coordinating Committee, that identified many promising opportunities for lupus research.

Sjogren's syndrome

Sjogren's syndrome affects many parts of the body and may occur in association with rheumatoid arthritis, lupus, scleroderma, and other disorders. The Institute is planning a multidisciplinary conference on the diverse manifestations of Sjorgren's syndrome to be held in January 1989 in order to focus attention and encourage research on this disorder.

Scleroderma

Scleroderma is a generalized disorder of connective tissue characterized by the overproduction of collagen, that is deposited in the skin and other organs, causing thickening and hardening. Studies of the causes of this disfiguring disease will be pursued.

Low back pain

A report to the Congress by NIAMS on low back pain suggests research strategies for dealing more effectively with this national problem. In May NIAMS will sponsor a workshop entitled, "New Perspectives in Low Back Pain Research," to seek new directions for research in this area.

Musculoskeletal fitness and sports medicine

A program announcement promoting research on exercise pathophysiology and sports medicine generated many research grant applications from the scientific community. Increased research in this area is needed to provide a solid scientific basis for training and rehabilitation programs. The NIAMS also sponsored a workshop on "Soft Tissue Injury and Repair," which identified numerous research opportunities.

Muscle biology

Intramural and extramural research efforts are providing important information on muscle tone, muscle metabolism, and the effects of exercise. The NIAMS continues to pursue basic research findings in this field.

Epidermolysis bullosa

Significant progress through research on this genetic disorder has been achieved, such as uncovering specific molecular defects in EB. Based on a treatment for burns, a successful new skin graft technique has been developed for treating EB. This Institute also supports the Epidermolysis Bullosa Registry, a patient identification system designed to facilitate clinical investigations and evaluation of new treatments.

The Committee is pleased to learn that considerable progress is being made in the fight against EB and that the National Registry is up and running and enrolling patients way ahead of schedule. The Committee continues to be concerned about the complex nature of EB and urges the Institute to continue to give high priority to research on EB. The Committee believes that specialized centers of research [SCOR's] have proven to be a successful mechanism in addressing the multidisciplinary needs of other genetic diseases, such as cystic fibrosis. In view of the medical burden caused by EB and its impact on its victims, their families and society, the Committee sees a need to begin planning for the establishment of a limited number of SCOR's in EB and other catastrophic skin diseases.

Skin diseases

Utilizing the advanced tools of molecular biology, scientists are gaining a better understanding of the structure and function of the skin. Two new therapies, cyclosporine A and derivatives of vitamin D, have been reported to be effective in treating psoriasis. In a controlled study, wrinkling of sun-damaged skin has been reversed by treatment with Retin-A.

The NIAMS has issued a Request for Application for core centers in skin diseases research and plans to fund two such centers in fiscal year 1988. The centers will enhance ongoing research efforts in dermatology and will encourage interdisciplinary research on skin diseases.

Intramural research program

The Institute's Orthopedic Research Unit has developed a new model for the study of bone fractures. Intramural scientists are now proceeding to define the natural history of fracture healing by taking advantage of the new tools of molecular biology of bone. This could lead to specific strategies designed to speed bone repair in humans.

AIDS

Recent data on both skin diseases and rheumatic diseases in individuals with HIV infection were reviewed at an NIAMS sponsored workshop on Opportunities for AIDS Research in Dermatology and Rheumatology, and several future research areas were identified. The Institute has issued program announcements inviting research proposals on the skin manifestations of AIDS, and on arthritis and musculoskeletal diseases recently associated with AIDS.

DIVISION OF RESEARCH RESOURCES

1988 comparable appropriation	$368,153,000
1989 appropriation request	357,987,000
House allowance	355,767,000
Committee recommendation	367,987,000

The Committee recommends an appropriation of $367,987,000 for research resources. This is $10,000,000 more than the administration request and $166,000 less than the 1988 appropriation of $368,153,000.

The Division of Research Resources provides for the development, support, and administration of major noncategorical research resources which complement and augment the extramural research activities of the National Institutes of Health [NIH]. Through six multicategorical programs, the Division awards grants, training grants, cooperative agreements, and contracts to biomedical research institutions throughout the country.

The Committee continues to be interested in ensuring that nursing research protocols are developed within research centers and urges DRR to continue its efforts in this area. The Committee appreciates

DRR's continuing efforts to work closely with the National Center for Nursing Research and feels that this will be most beneficial to the entire NIH.

Clinical research

The Clinical Research Program, which administers 78 general clinical research centers, provides the clinical environment in which investigators, supported by NIH and other Public Health Service [PHS] components, study the cause, prevention, and treatment of human disease. The GCRC's support research activities related to all the major NIH health research initiatives, including cancer, diabetes, arthritis, human gene mapping, AIDS, infectious diseases, nutrition, aging, and immunology, among many others.

Biomedical research technology

The Biomedical Research Technology Program identifies, develops, and provides access to the advanced technologies needed in biomedical research. The program has supported research resources that enable applications of artificial intelligence, mathematical modeling and simulation of biological and physiological systems, image processing, computer graphics for the study of protein structure and function, access to supercomputer capabilities, and research and development in implantable miniature microelectronic transducers and sensors. Furthermore, support is also provided for mass spectrometry, high field nuclear magnetic resonance, synchrotron radiation, electron microscopy, flow cytometry, and the use of laser technology to study cell properties and growth.

Laboratory animal sciences and primate research

DRR supports seven regional primate research centers, animal diagnostic laboratories, training of research specialists in laboratory animal sciences, development of animal and nonanimal models, the improvement of laboratory animal facilities, and other resources that support biomedical research.

The primate research centers have continued to make important contributions in research areas such as infectious diseases, AIDS, neurosciences, toxicology, immunology, reproductive biology, nutritional and metabolic diseases, and environmental health sciences.

The Laboratory Animal Sciences [LAS] Program continues to assist institutions in upgrading their animal facilities and developing centralized programs of animal care in support of their research programs through the award of animal facility improvement grants. The LAS Program has recently begun a new initiative to develop a more appropriate animal model for AIDS research. If a new animal model can be developed for studying the AIDS virus in humans, research on AIDS will be greatly enhanced.

The Biological Models and Materials Resources Section has expanded its exploration and support of the utilization of cell systems, lower organisms, and nonbiological models for use in biomedical research.

Alternatives to animals in research

The Committee reiterates its strong support for the development and utilization of alternative research models which do not rely on the use of animals. One such alternative is the national disease research interchange [NDRI], whose mission is to ensure regular access to human tissues and organs for biomedical researchers throughout the country. Breakthroughs in the treatment and cure of many diseases can be expected through the development of these alternative resources. In addition, it is the Committee's intention that NIH continue to develop resources which do not require the use of animals in research experiments.

Biomedical research support

The Biomedical Research Support [BRS] Program provides BRS formula grants, shared instrumentation grants [SIG], and the minority high school student summer research apprentice grants. The BRS formula grant program advances and strengthens the biomedical research programs of academic and scientific institutions by providing flexible funds for pilot research, central resources, support for new investigators, and interim funding for investigators awaiting award of research grants. Shared instrumentation grants support the acquisition of sophisticated, state-of-the-art instruments—such as electron microscopes, mass spectrometers, nuclear magnetic resonance spectrometers, and image analysis systems—to be shared by groups of PHS-funded investigators. The Minority High School Student Summer Research Apprentice Program enables minority high school students to spend eight weeks in universities and other research laboratories, with the goal of stimulating the interest of these students in biomedical research careers.

Minority biomedical research support

The Minority Biomedical Research Support [MBRS] Program increases the numbers of minority biomedical scientists by supporting the participation of undergraduates, graduate students, and faculty in biomedical research and, at the same time, strengthens the research and research training capabilities of minority institutions. In 1989, the program will continue its Animal Resource Improvement Program for MBRS grantee institutions to provide necessary renovations, new cages and related equipment, as well as consultation and training in laboratory animal care for faculty, students, and animal care technicians at these institutions.

Research facilities improvement

The Division began a new program—the Research Facilities Improvement Program—in 1988 to provide infrastructure improvements at institutions conducting AIDS research. This program provides for the acquisition, repair, renovation, modernization, and expansion of existing AIDS research facilities, and the purchase of associated equipment. Support is also provided for upgrading and modernizing the research facilities and animal space at the primate research centers involved in AIDS research. All of the research facility improvement awards are expected to have been made by December 1, 1988.

The Committee has added $10,000,000 for an extramural research facilities improvement program. One-half the funds are to go to AIDS-related facility needs and the program is to be operated pursuant to the guidelines of title I of S. 2222 as reported to the Senate on March 29, 1988. Legislative authority has been added as needed to conduct this program. Projects such as the Primate Research Institute are among the eligible facilities.

Research centers at minority institutions

The Committee has included the full amount requested for the Research Centers at Minority Institutions [RCMI] Program. This program assists minority health professions institutions in the development of their research infrastructure and investigative capability. Individual institutes are strongly encouraged to cofund RCMI grants to assist in the development of disease specific health problems that disproportionately affect minorities.

NATIONAL CENTER FOR NURSING RESEARCH

1988 comparable appropriation	$23,380,000
1989 appropriation request	25,107,000
House allowance	27,417,000
Committee recommendation	28,107,000

The Committee recommends an appropriation of $28,107,000 for the National Center for Nursing Research [NCNR]. This is $3,000,000 more than the administration request and $4,727,000 more than the 1988 appropriation.

The NCNR supports, disseminates, and may conduct basic and clinical research and research training related to patient care. The client and family as they respond to the promotion of health and the treatment of illness are the foci of nursing research. Substantial progress is evident in the establishment of this new national research program.

Meeting the challenge of Alzheimer's disease

The Committee has recommended funding for a significant enhancement to the ongoing programs of Alzheimer's Disease [AD] research. While the majority of this funding is included in the National Institute on Aging, two significant elements are included in the National Center for Nursing Research. First the Committee has included $1,500,000 in the NCNR budget for burden-of-care research. Most Alzheimer's disease patients receive most of their care from family members, friends and neighbors. Research must be expanded on the social and behavioral aspects of care of AD patients and more needs to be learned as to how care givers can best respond. Second, the Committee has provided $600,000 to the NCNR to work cooperatively with the NIA on training efforts needed to reach the full range of care givers including nurses, social workers, home health aides, homemakers and those with primary responsibility for care. The Committee expects NCNR to become fully and completely involved with NIA in pursuing these proper goals.

Research programs

The adequacy of patient oxygenation during nursing care is a promising area of science being pursued by the Center. Studies are also focused on the treatment of urinary incontinence through physiological and behavioral interventions such as prompted voiding and pelvic muscle control. A third area of study concerns the safety and effectiveness of followup home care by nurse specialists visiting low birth weight infants who have been discharged early from the hospital. The Center continues to support a wide spectrum of basic and clinical nursing research using both behavioral and biomedical approaches. The Committee is pleased with recent NCNR efforts to develop depth in the scientific base through the establishment of research priorities. The Committee requests the report of these priorities, as they are developed and approved by the NCNR Advisory Council. The Committee understands that the first set of nursing research priorities have been identified as the critical areas of prevention and care of low birth weight infants and families, and the psychological/physiological aspects of care of patients, partners and families with HIV infection.

The Committee is interested in recent NCNR program announcements soliciting applications that address the management of pain, available resources and the quality of patient care, health promotion and disease prevention, and self care practices of cancer patients which were issued jointly with the National Cancer Institute. The request for applications for research and demonstration of innovative nursing care delivery models in hospitals is of particular interest to the Committee which hopes that nurse midwifery would become an element of this research focus. Studies which address nursing recruitment and retention issues in relation to patient care should be encouraged.

The Center needs to intensify its encouragement of studies that focus on the prevention and care of HIV infected patients and their families. While other agencies focus on the development of vaccines and therapeutic agents, it is also critical that NCNR focus on protocols for patient care of HIV infection at different stages of illness. Studies of HIV-positive infants' health care needs should be given priority by NCNR, as should the prevention of infection in at-risk populations, such as adolescents. The Committee also encourages the NCNR to address ethical issues related to clinical decisions of patients, families, and health care providers in the care of persons with AIDS and other chronic illnesses as well. The Committee has been especially pleased with the efforts of the NCNR to co-fund projects with other Institutes at the NIH. For example, the Committee is quite interested in the collaborative efforts with the NICHD in the multicenter network of maternal-fetal machine units and efforts to work with NIA to encourage studies on self care and injury prevention of the frail elderly.

Retention of nurses

NCNR has undertaken a number of initiatives addressing concern with retention of nurses in the profession. Support has been provided for a number of research project grants, fellowships and a career development award addressing nursing resources and patient care delivery. Study topics include nurse retention in intensive care units, and studies of drug use, stress, and job performance among nurses.

The Committee recommends that serious attention be given to the nursing shortage, especially in the rural areas in the southeastern States. Working with comprehensive colleges of nursing, programs should be developed to utilize television capabilities to deliver undergraduate, graduate, and continuing education coursework to statewide locations. Efforts should be made through consortium arrangements for recruiting students to these programs thus enabling the cultivation of new students of nursing as well as educating those individuals at sites in close proximity to their homes.

Research training

A major NCNR initiative is focused on accelerating the development of the national pool of nurse scientists. Individual and institutional research training awards are receiving extra funding, and the newly established research career development awards are being offered to draw experienced faculty members into research.

In accordance with Congressional intent, and recommendations of the National Academy of Sciences, the Center is devoting considerable time and effort to develop a program of research training to ensure that an adequate supply of qualified nurse scientists is available to meet future needs. The development of postdoctoral opportunities for promising scientists' needs to continue as preparation of predoctoral students expands to meet the recommended goals of the National Academy of Sciences. It was the Committee's intent that at least $2,000,000 of the Center's total fiscal year 1988 appropriations be used to continue the National Research Service Award program for nurse scientists. The Committee is pleased that over $2,600,000 was used for this purpose last year for pre- and postdoctoral fellowships. The Committee is especially pleased that the funding of career development awards increased beyond the fiscal year 1987 projections. The definition of a career trajectory for research training for nurse scientists is encouraged. The Center should give consideration to encouraging interdisciplinary training experiences, such as joint psychology-nursing programs. Efforts to encourage minority nurses (including native Hawaiian, Alaskan, and American Indians) to move into careers in science need to be given priority, especially as overall trends for minorities with doctorates in all fields decrease.

National planning process

With the participation of the nursing scientific community, the Center has begun to define a National Nursing Research Agenda. The objectives of the Agenda are to provide a structure for selecting scientific opportunities, identifying research priorities, defining initiatives for the further development of the knowledge base for nursing practice, and to give direction and momentum to research within the nursing discipline.

JOHN E. FOGARTY INTERNATIONAL CENTER FOR ADVANCED STUDY IN THE HEALTH SCIENCES

1988 comparable appropriation	$15,651,000
1989 appropriation request	16,074,000
House allowance	16,074,000
Committee recommendation	16,474,000

The Committee recommends an appropriation of $16,474,000 for the Fogarty International Center [FIC]. This is $400,000 more than the administration request and $833,000 more than the 1988 appropriation of $15,651,000.

The FIC promotes biomedical research and research training internationally. Through its fellowships, bilateral agreements, exchange and other international programs, the FIC supports collaborative research efforts both in the United States and abroad.

Research program

FIC fellowships and scholars awards support research that can benefit from collaborative efforts internationally, on any disease, disability, or organ system. The FIC awards fellowships to foreign and U.S. scientists to conduct research activities in a multitude of areas including Alzheimer's disease, hypertension, brain injury, the association of herpes virus with atherosclerosis, neurophthalmic disorders, and AIDS.

Other international activities

FIC studies on other health topics of international interest include a project on strategies to prevent hepatocellular carcinoma among those greatly at risk of this disease as a result of previous exposure to hepatitis B, and the control and prevention of tuberculosis. The FIC also coordinates the NIH's participation in 67 bilateral agreements with 39 countries, and is responsible for the management and administration of the PHS Health Scientist Exchange and NIH Biomedical Research Exchange Programs. The Committee recognizes that for the past several years the Fogarty International Center has supported a scientific position in the United States Embassy in India, to represent the research interests of the NIH and PHS. This has proved to be very fruitful in that efforts of the United States-Indian Science and Technology Initiative have been significantly advanced and collaborative initiatives with nearby countries improved. The Committee recommends that the presence of appropriate scientific representatives in other areas of the world will help the Fogarty International Center and NIH take advantage of research opportunities and develop collaborative relationships for U.S. scientists. This would be a Fogarty International Center program and responsibility, and would require four additional positions and $400,000 annually to provide, at any given time, science advisors in selected embassies in four additional parts of the world.

Special initiatives

In response to a congressional request for expansion of its role in AIDS research, the FIC has initiated two new award programs: the Special International Postdoctoral Research Program in AIDS, and the

International Training Grants Program in epidemiology related to AIDS. These research training efforts will provide the opportunity for advancing scientific knowledge and skills in the epidemiology, diagnosis, prevention, and treatment of AIDS. The Committee was pleased to learn of the interest of the Fogarty Center in receiving applications in the area of nursing research as a result of the Committee's directive last year. The Center is urged to continue its efforts in developing appropriate links with the International Council of Nurses and other national and international nursing organizations in order to promote quality nursing research.

Gorgas Memorial Institute

The FIC serves as a conduit for core support funding for the Gorgas Memorial Institute [GMI] and the Gorgas Memorial Laboratory [GML]. Located in Panama, the GMI/GML's research program, supported by core funds and peer reviewed grants and contracts, consists of five scientific divisions: Epidemiology, infectious diseases, parasitology, virology, and tropical biology. These programs examine the occurrence, causes, prevention, and treatment of public health problems in Panama and other parts of Latin America, while contributing to health improvements world-wide.

The Committee believes that the relationship between GMI/GML and the NIH needs to be reexamined. GMI/GML is a private nonstock, nonprofit Delaware corporation. In 1928 Congress authorized appropriations to GMI/GML pursuant to a recognized need for a research facility dedicated to the study, investigation and prevention of tropical and other disease. Since that time the NIH has established the Division of Tropical Medicine within the National Institute of Allergy and Infectious Diseases [NIAID]. The Director of NIAID informed the Committee that no need from a scientific perspective exists for the continued uncompeted support of GMI/GML. NIH has come to regard the funding to GMI/GML as a pass-through and does not consider itself responsible for oversight or evaluation of the science performed by GMI/GML. This perspective seems to have been supported by GAO which reported in a letter dated September 17, 1980, to the President of GMI/GML that the appropriation to GMI/GML is in the nature of an outright, unrestricted gift.

The Committee believes that the grant to GMI/GML should be competed every 3 or 5 years and that this work does not necessarily need to be performed in Panama. The Committee therefore directs FIC to inform the GMI/GML that support beyond fiscal year 1989 will be awarded only on the basis of peer reviewed competition. Furthermore the Committee believes that this work should be reviewed and awarded by the Division of Tropical Medicine within the NIAID in order to insure an integrated program of tropical medicine research.

NATIONAL LIBRARY OF MEDICINE

1988 comparable appropriation	$67,910,000
1989 appropriation request	70,626,000
House allowance	64,836,000
Committee recommendation	70,626,000

The Committee recommends an appropriation of $70,626,910 for the National Library of Medicine [NLM]. This is the same as the administration request and $2,716,000 more than the 1988 appropriation of $67,910,000.

The NLM's primary responsibility is to collect, organize, and disseminate the world's biomedical literature, ensuring maximum use of its advanced information systems by engaging in a program of outreach to the health professional community and by providing a variety of grant support to the medical information community.

National Center for Biotechnology Information

The Committee is pleased with the progress being made in establishing the National Center for Biotechnology Information. The Committee has included the full amount requested for this important initiative.

The Committee expects these funds to be used to further the design development and management of automated systems for information on human, animal, and plant molecular biology, biochemistry, and genetics. The Center will also conduct research into advanced methods of information processing using Center capabilities as well as those in university, private and Federal research laboratories. The Center will also serve to coordinate the input and access to information regarding biotechnology from Federal and State government agencies, agency grantees and contractors, and where possible to inform agencies of duplications of research efforts. It will encourage cooperation between government and private sector sources of biotechnology information.

While genetic information is being rapidly developed, access to that information is critical if maximum benefits are to be obtained. That is particularly important in the case of human genetic diseases. Since this information is expanding rapidly, development of better information handling systems is critical to ensure human health benefits and the efficient progress of further research without needless and costly duplication. The Committee is confident that the National Library of Medicine is the most qualified Government organization to undertake this activity, because of its demonstrated expertise in the field of biomedical communications, service, and information research.

Unified medical language system

Another initiative of the Library is to develop a unified medical language system [UMLS]. The UMLS will improve access to computerized biomedical information of all kinds by making the many existing classifications of medical knowledge invisible to the user of computerized information systems. Grateful Med, NLM's microcomputer-based software package, is one successful result of this work. Grateful Med allows individual health professionals without special knowledge or training to access some 10 million records in the NLM's online databases. More than 10,000 copies of the Grateful Med software have been sold by the National Technical Information Service.

Education/outreach

The Library's outreach program, recently mandated by Congress, is designed to ensure that all American health professionals, no matter how remote their location, have access to the world's biomedical literature through the NLM's services. DECLINE, which permits users nationwide to enter online requests for the loan of books, journal articles, and audiovisuals is one component of this service. Grateful Med, mentioned above, is another. To inform health professionals about the services available to them, the Library is increasing its outreach programs through demonstrations and exhibits at meetings, articles in medical publications, and an accelerated program of training health professionals to use their microcomputers to access NLM's many computerized databases.

Outreach to rural areas

The Committee instructed the National Library of Medicine in fiscal year 1988 "to develop an outreach program aimed at science and technology transfer of the latest scientific findings to all health professionals * * * in rural communities and other areas" (S. Rpt. 100–189, pp. 138–9). The NLM was directed to report on its progress to the Committee, and reported in January 1988 on the provision of journal articles, books, and audiovisuals that had been made available to health professionals, mostly through local hospital libraries.

The Committee is concerned that hospitals undergoing financial hardship, especially small rural hospitals, may be unable to commit scarce resources to maintaining their libraries. The Committee further notes with concern that health care professionals, including pharmacists, nurse practitioners, nurse midwives, physicians, psychologists, and others in isolated areas, who are most likely to lack access to recent scientific and technological findings, are also least likely to have access to such libraries.

The Committee therefore requests that the NLM develop an active outreach program to disperse this information to rural and remote health care professionals, and devise a method of notifying these professionals of the availability of up-to-date information.

The Committee further requests that the NLM work with nursing organizations in developing informatics and classifications for research.

OFFICE OF THE DIRECTOR

1988 comparable appropriation	$61,819,000
1989 appropriation request	59,578,000
House allowance	71,578,000
Committee recommendation	65,578,000

The Committee recommends an appropriation of $65,578,000 for the Office of the Director [OD]. This is $6,000,000 more than the administration request and $3,759,000 more than the 1988 appropriation of $61,819,000.

The OD appropriation supports the central policy and administrative offices of the NIH, which are responsible for development of the overall research policy for intramural and extramural research programs. These offices also provide for administration of centralized services in areas such as communications, science policy and legislation, equal opportunity, contract and grant administration, and financial and personnel management.

Area and RCMI Programs

The OD supports the Academic Research Enhancement Award [AREA] Program which was created to strengthen the research environment in non-research intensive educational institutions that provide training for a significant number of our Nation's research scientists.

The Research Centers in Minority Institutions [RCMI] Program was developed to establish centers in predominantly minority institutions that offer doctoral degrees in health professions or sciences related to health.

AIDS

The OD provides support for the new Office of AIDS Research [OAR], NIH. The OAR was established in 1988 to coordinate NIH intramural and extramural AIDS research; to centralize various AIDS-related policy and operating functions; and to represent the NIH Director on AIDS-related matters.

The OD also supports other AIDS-related research activities, specifically, the continuation of an intramural research project to develop targeted antiviral agents for the treatment of AIDS, AIDS research under the RCMI Program, and funding to address the bioethics and biosafety issues related to AIDS.

The Committee has added $6,000,000 to the budget for the Office of the Director for at least 200 additional researchers and other employees to be assigned to the AIDS programs of the various institutes. During the hearings it was noted that the NIH AIDS budget has grown ninefold since 1985 while the personnel devoted to AIDS has grown threefold over the same period of time. The Committee concurs in the view that this mismatch of personnel and funding growth is undesirable. The Committee requests that the Director assign these additional personnel to the various institutes on a basis largely proportionate with the AIDS funding growth of the Institutes. Legislative authority has been provided to the Director for this purpose.

Mismanagement of NIH procurement

During the hearings the Committee discussed five internal reports that have been issued over the last 5 years by the Inspector General and various Assistant Secretaries within the Department pointing out the weaknesses in the NIH procurement system. The Committee learned that to resolve the issue of the negative reports, NIH argued for the need for an independent analysis of its procurement system. That report was issued February 11, 1988, and was conducted by the Logistics Management Institute [LMI]. The report found that the NIH material support system is extremely responsive but falls short on economy and compliance. For example, LMI found that procurement productivity could be improved by nearly 40 percent, saving nearly 100 work-years annually. In other words the independent analysis requested and funded by NIH has confirmed the five previous negative reports issued by Department offices.

The inspector general in his April 15, 1988 letter noted that "$26,000,000 in precious research funds are being lost each year due to inefficiency and mismanagement."

The inspector general also notes: "failure to act could undermine public confidence in NIH's ability to provide proper stewardship over the funds appropriated for biomedical research." Additionally, the inspector general stated "for the past 5 years NIH has offered only arguments and hollow promises with little overall progress in addressing the noted problems."

The Committee views this matter seriously and directs that all necessary reforms be implemented without delay. The Committee notes that NIH has taken exception with the inspector general estimate of $26,000,000 in savings that would result from these reforms and has therefore reduced the NIH request by only $6,765,000 to reflect the savings that the Committee expects can be achieved from these reforms. The Committee further notes that this savings is to be applied to each of the Institutes in proportion to their procurement through the centralized procurement Office of Research Resources. Legislative authority has been provided to the Director to accomplish this purpose.

The Committee expects the NIH to report on these procurement reforms during the fiscal year 1990 hearing process. The Committee also directs the NIH to report on how standard procurement practices impact on the conduct of Federal research efforts.

Behavioral research

The Committee again emphasizes its strong support for the health and behavior research of NIH, and reiterates its intent that NIH expand its health and behavior research portfolio. Over the past 10 years, there has been a growing recognition in the scientific community and among the public of the critical role of health and behavior in the diagnosis, treatment, and prevention of disease. The Institute of Medicine [IOM] in its 1982 report, "Health and Behavior," and the Surgeon General in the 1987 report, "Healthy People," have reported at length on the relationship of health and behavior to disease diagnosis, treatment, and prevention. These reports document that as much as 50 percent of mortality from the 10 leading causes of death in the United States can be traced to long-term patterns of behavior, and that 7 out of 10 leading causes of death in this country are in large part behaviorally determined and can be significantly reduced through changes in behavior. According to NIH statistics, the proportion of the overall NIH budget devoted to health and behavior research and research training has remained constant since 1984 at about 3 percent. This allocation of resources for health and behavior at NIH is not in keeping with what the Committee has learned about the relationship of behavior to illness and disability in our society and to the associated cost of behaviorally influenced health problems.

As the Nation's largest source of funding for biomedical and biobehavioral research, the role of NIH encompasses the fostering of basic inquiry in the area of health and behavior and its application to problems of health. Accordingly, the Committee re-emphasizes its intent that NIH establish each year meaningful and explicit goals to raise its expenditures on health and behavioral research above its current proportion of 3 percent and to submit a report by the beginning of next year to the Committee on the progress that has been made in that regard.

Nursing research

The Committee has been genuinely pleased with the efforts of the NIH and the various individual Institutes to encourage the involvement of nursing expertise in their programs and policy deliberations. At this time the Committee would appreciate the Director reconvening his NIH task force on nursing research and developing an undated version of the 1984 Report to the Director. The Committee would be especially interested in learning of the extent to which the earlier recommendations have been implemented and of further recommendations that the task force may have. It is further suggested that the Director continue to invite representatives of appropriate national nursing organizations to serve as consultants to his task force.

Fetal tissue

The Committee is very concerned about the Department's recent decision to withhold approval of all proposed research which involves the transplantation of human tissue from induced abortions. All approvals of this type of research proposals will be withheld pending recommendations by a special outside advisory committee to be convened by NIH. The Committee recognizes that important research is being delayed while this issue is under consideration, and, therefore, expects that the special advisory board will make its report in an expeditious manner. The Committee expects to be kept informed of all developments and recommendations made to the Department on this issue.

BUILDINGS AND FACILITIES

1988 comparable appropriation	$47,870,000
1989 appropriation request	5,000,000
House allowance	20,000,000
Committee recommendation	12,500,000

The Committee recommends an appropriation of $12,500,000 for buildings and facilities. This is $7,500,000 more than the administration request and $35,370,000 less than the 1988 appropriation of $47,870,000.

The buildings and facilities appropriation provides the funds for NIH construction programs including design, construction, improvements, and major repair of clinical and laboratory buildings and supporting facilities necessary to the mission of the NIH. The funds in this appropriation support the 60 buildings on the main NIH campus in

Bethesda, MD; the NIEHS facility in Research Triangle Park, NC; the NIH Animal Center in Poolesville, MD; the Rocky Mountain Laboratory in Hamilton, MT; the Frederick Cancer Research Facility in Frederick, MD; the Primate Facility in Perrine, FL; the Gerontology Research Facility in Baltimore, MD; and other NIH field stations.

The Committee directs that $5,000,000 be spent on AIDS-related facilities. The Committee has added language to rename building 31 the Claude Hansen Pepper Building.

Repairs and improvements

The appropriation supports a program of repairs and improvements to existing buildings and facilities and those under design or construction. The routine activities in this area are essential because of age, usage, exposure to the elements, and changes in space utilization.

Buildings and facilities

As noted in the NCI section of this report, the Committee has transferred $2,500,000 from the NCI's budget request to the "Buildings and facilities" account for renovations at the Frederick Cancer Research Facility.

The Committee is concerned that House Appropriations Committee report language will unduly restrict alterations and renovations of the NIH facilities, and thus, inhibit research progress. The Committee recognizes that alterations and renovations of facilities are a normal part of carrying out the NIH research mission. To do so NIH requires a reasonable amount of flexibility in using program funds to adapt to the rapidly changing opportunities in research. The committee, therefore, concurs with the use of program funds for these purposes with the understanding that the Committee will be notified if an individual project exceeds $400,000.

Construction programs

The buildings and facilities supports several ongoing NIH construction projects. These include the modernization of the Warren G. Magnuson Clinical Center, the renovation of six of the older laboratory buildings on the NIH campus, AIDS-related renovations, the initiation of design and preparation of the site for the Child Health/Neuroscience/Primate Facility, and the upgrading of NIH animal facilities to meet accreditation standards.

The majority of employees of the National Institutes of Health are housed on the central campus in Bethesda, MD. However, there are currently over 2,600 employees scattered across four different off-campus locations, some of which are several miles from the main campus. This arrangement has greatly reduced operating efficiency while incurring significant direct costs. NIH has estimated that the costs of entering into a lease-purchase agreement for a building on the NIH campus as compared with the continuation of the current leases in four separate off-campus buildings would save approximately $66,000,000 over a 20-year period. Language has been included in the general provisions which directs the NIH to enter into a lease-purchase contract for an office building on the NIH campus. The Committee expects the building to include approximately 700,000 square feet and have a cost not to exceed $95,000,000.

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH

1988 comparable appropriation	$1,373,727,000
1989 appropriation request	1,504,413,000
House allowance	507,594,000
Committee recommendation	1,583,191,000

The Committee recommends an appropriation of $1,583,191,000 for alcohol, drug abuse, and mental health activities. This recommendation is $1,075,597,000 more than the House allowance, $78,778,000 more than the administration's budget request, and $209,464,000 more than the fiscal year 1988 appropriation.

The purpose of the Alcohol, Drug Abuse, and Mental Health Administration [ADAMHA] is to develop an understanding of, and to assist in treating, alcoholism, drug abuse, and mental disorders. ADAMHA operates intramural research facilities and awards project grants and contracts for extramural research, research training, and prevention programs. Additionally, ADAMHA provides block grant funding to States to help finance alcohol, drug abuse, and mental illness prevention and treatment programs, including those for the homeless mentally ill. ADAMHA also serves as the major Federal agency responsible for educating the public about these problems.

The agency consists of three institutes: the National Institute of Mental Health [NIMH], the National Institute on Drug Abuse [NIDA], and the National Institute on Alcohol Abuse and Alcoholism [NIAAA]. Each of these institutes is divided into research, training, and direct operations components. Separate amounts are also provided for overall agency administration, for the block grant and demonstration programs, for the Office of Substance Abuse Prevention, and for intramural research facility repair and renovation.

AIDS

As part of its AIDS initiative, the Committee provides $177,617,000 to ADAMHA for AIDS research, education, and prevention activities. This amount is the same as both the administration request and the House recommendation, and $65,360,000, or 58 percent, above the 1988 appropriation. Of this amount, $49,364,000 is provided for NIMH, $121,998,000 is allocated for NIDA, and $6,255,000 is provided for NIAAA.

Research

As requested by the administration, $71,149,000 is provided for AIDS research at the three institutes: $39,947,000 for NIMH; $25,594,000 for NIDA; and $5,608,000 for NIAAA. Much of the $18,197,000 increase above 1988 AIDS research funding at the three institutes would go to support seven new research centers.

NIMH research will focus on the psychosocial aspects of AIDS; psychoimmunology and the regulation of immune responses by behavioral processes; and basic research on central nervous system effects. The Committee concurs with NIMH's increased emphasis on research into the behavioral components of AIDS and successful interventions to change high-risk behaviors, particularly those among specific subpopulations. The National Academy of Sciences maintains that human behavior is one of the most complex and poorly understood aspects of society's response to the AIDS epidemic and called research in this area one of the most important and immediate needs. NIMH is encouraged to expand its activities to include the collection of concrete survey data on human behaviors and to study the characteristics of those individuals who have changed high-risk behaviors in comparison to those who have not.

NIDA research efforts will include epidemiological studies, prevention intervention strategies, modification of drug-taking behaviors, and drug treatment techniques. Epidemiological studies and the effect of alcohol on the immune system will be priority research areas for NIAAA. The Committee urges NIDA and NIAAA to increase their attention to research on the link between substance abuse and high-risk activities and strategies to prevent such interactions.

Research training

For the first time, as requested by the administration, funding is provided for AIDS research training. The sum of $2,357,000 is allocated to support 18 institutional and individual awards. Of the total, $2,174,000 is targeted to NIMH and $183,000 is provided for NIAAA.

Health professionals training

As requested by the administration, $11,850,000 is provided for the training of health and mental health care workers who deal with AIDS patients or those at risk of contracting AIDS. Of this amount, $5,372,000 is allocated for NIMH; $6,200,000 is provided for NIDA; and $278,000 is designated for NIAAA. The Committee is pleased that ADAMHA has expanded its efforts in this area.

Prevention demonstrations

The sum of $47,279,000 is provided to NIDA, as requested by the administration, for outreach and prevention demonstration projects. Comprehensive demonstrations will be continued in 15 high-prevalence and 8 low-prevalence cities. Targeted outreach demonstrations testing a specific intervention strategy will be expanded to include public housing projects with high incidence of drug abuse and IV drug-abusing women and their children.

IV drug treatment demonstrations

A new initiative, requested by the administration, will provide $40 000,000 for IV drug treatment demonstrations. Funds would be distributed to States and communities with high rates of drug abuse and insufficient treatment capacity in order to expand the number of IV treatment slots. Grantees would be required to implement promising treatment strategies that have not been widely used. The Committee expects mental health services to be included as part of the treatment provided in these demonstrations, since they can be an important component of a comprehensive plan to change drug-abusing behavior.

The Committee also provides an increase of $24,083,000 above 1988 funding for drug treatment as part of the substance abuse block grant. States are encouraged to use this funding for treatment of IV drug abusers to complement their AIDS prevention strategies.

Drug abuse

The Committee is acutely aware of the pressing need to address the problem of drug abuse. Programs funded within this bill focus on the demand side of the drug abuse problem, providing education, prevention, and treatment services.

While the quality of available data is poor, the Committee understands that there may be 6.5 million drug abusers who are seriously enough impaired to require treatment. Of these, 1.2 million are thought to be intravenous drug abusers. Approximately 250,000, or about 4 percent, of the 6.5 million abusers are currently in some form of treatment. Of the 1.2 million IV drug abusers, about 150,000 are in treatment.

IV drug abuse poses an ominous new threat to society with its potential for the transmission of the AIDS virus. The sharing of needles and the transmission of the virus to the sexual partners of IV drug abusers is thought to be the primary path for the spread of the disease to the heterosexual population. The perinatal transfer of AIDS is a particularly tragic outcome of this spread. HIV seroprevalence rates among IV drug abusers vary widely across cities, but are already at 60 percent in some areas.

The drug abuser population is a difficult one to assist. Many addicts abuse multiple drugs, rather than having a primary drug of abuse, or mix alcohol and drugs. Addicts often have other serious problems that complicate treatment, such as psychiatric disorders, high rates of unemployment, criminal records, and alienation from their families. As a result, a high percentage of abusers may require publicly financed treatment.

The Committee attempts to address the severity of the drug abuse problem by increasing funding for education, treatment and prevention programs throughout the bill. Included in the Committee's mark are:

Drug abuse research/training	$135,386,000
Alcohol, drug abuse, and mental health block grant	508,860,000
Substance abuse block grant	180,000,000
Office of Substance Abuse Prevention	34,264,000
IV drug treatment demonstrations	40,000,000
Drug-free schools and communities (Education Department)	250,000,000

This funding is $119,108,000, or 11.6 percent, above the amount provided for these programs in 1988.

Alcohol, drug abuse, and mental health block grant

For the alcohol, drug abuse and mental health block grant, the Committee recommends an appropriation of $508,860,000, which is $21,543,000 above the 1988 level and the same as the administration request. The House deferred consideration of this program pending reauthorization.

The block grant was established by Congress as part of the Omnibus Budget Reconciliation Act of 1981, which combined all mental health and substance abuse service programs, with the exception of the Community Support Program, into a single grant to be administered by the States.

The Committee understands that current reauthorization efforts may change the structure of the ADAMHA block grants, but expects that any future consolidations of block grants will maintain amounts provided here for each of the components.

Substance abuse block grant

The Committee recommends $180,000,000 for substance abuse grants to States, which is $24,083,000 above the 1988 level and $14,083,000 above the administration request. The House deferred consideration of this program pending reauthorization.

Forty-five percent of the block grant funding is allocated on the basis of population, and 55 percent is distributed on the basis of need. Funds are to be used specifically for alcohol abuse and drug abuse treatment and rehabilitation activities.

The Committee has added $14,083,000 in funding above the administration request in recognition of the urgent need for expansion of State and local drug treatment programs. Intravenous drug treatment funding has also been increased by $40,000,000 above 1988 within the ADAMHA AIDS allocation, as requested by the administration.

Homeless Mentally Ill Block Grant Program

The Committee recommendation includes $14,300,000 for the block grant for services to the homeless mentally ill, which is $2,811,000 above the 1988 level and the same as the administration request. The House did not provide funding for this purpose due to lack of authorizing legislation.

This block grant was originally authorized in the Stewart B. McKinney Homeless Assistance Act. States are required to use their allotments for activities such as outreach, outpatient mental health services, training, case management, and supportive and supervisory services. Funds are distributed among the States according to an urbanized population-based formula. States are required to contribute $1 for every $3 in Federal funds they receive.

Office of Substance Abuse Prevention

The Committee provides $34,264,000 for the Office of Substance Abuse Prevention [OSAP], $66,000 more than the 1988 level and the same as the administration request. The House deferred consideration of this program pending reauthorization. Of this amount, $21,000,000 is allocated for demonstration projects and $13,264,000 is designated for direct operations.

OSAP was created in the Anti-Drug Abuse Act of 1986 to consolidate, coordinate, and support ADAMHA's ongoing drug and alcohol abuse prevention program activities, as well as to administer new demonstrations for prevention and treatment among high-risk youth.

The sum of $21,000,000 is provided to support three types of demonstration grants for high-risk youth: comprehensive prevention, treatment, and rehabilitation projects which develop community-based intervention models with multiple coordinated services; targeted primary prevention demonstration projects which are designed to reduce the incidence of new cases of substance abuse and may address only one high-risk group; and early intervention counseling demonstration grants for youths with early involvement with gateway drugs. The amount provided is sufficient to continue all projects that have requested funding for 1989, as well as to support four to five new demonstration projects.

The Committee encourages OSAP to use a portion of the funding provided for new projects to support a prevention demonstration project targeted to teenage female drug abusers to encourage treatment of their substance abuse prior to their becoming pregnant or during their pregnancy. Such a demonstration should coordinate the provision of the following services: assessment, evaluation, and referral; prenatal care and substance abuse treatment; vocational services; and child care.

The sum of $13,264,000 is provided for OSAP direct operations. This portion of the account supports a communications initiative, including the National Clearinghouse for Alcohol and Drug Information and media campaigns; a prevention implementation initiative, which provides technical assistance to parent and youth organizations, minority organizations, and the local chapters of national organizations; and evaluation of the high-risk youth demonstrations.

Mental health research

The Committee recommends $297,044,000 for non-AIDS mental health research, which is $20,277,000 above the House allowance, $25,277,000 more than the budget request, and $43,379,000 more than the fiscal year 1988 appropriation.

Schizophrenia.—The Committee is pleased with the high priority NIMH is placing on advancing research on schizophrenia, which is the most chronic and disabling of the major mental illnesses. The development of the national plan for schizophrenia research is an important step in building on the research breakthroughs recently made. The Committee intends that a significant portion of the $25,277,000 provided above the administration request be used to support the highest priority schizophrenia research recommended by the national plan. The Committee would also expect that the new and competing schizophrenia research grants awarded within the requested level will be used to implement the national plan.

The Committee has learned of an initiative identified in the national schizophrenia plan to establish a brain information and epidemiology service. The Committee encourages the Department to consider establishing such a service consistent with the priority it receives in the national schizophrenia plan.

Mental disorders of aging.—The over-65 group is the fastest growing segment of the U.S. population. More than 20 percent of those 80 years of age and older suffer dementia, including Alzheimer's disease. Consequently, the Committee believes that NIMH should increase its research efforts in the important area of aging disorders. The Committee expects that a portion of the funding provided above the administration request will be allocated to this area.

Depression and manic depressive illness.—The affective disorders, including mania and various forms of depression, are among the most prevalent types of mental illness. Existing treatments can help about 80 percent of those afflicted; yet only 1 in 5 victims seeks treatment. The Committee applauds NIMH's efforts to disseminate what is known about the etiology, diagnosis, and treatment of depression through project depression: awareness, recognition, and treatment. NIMH is encouraged to expand its efforts in educating the public and health care professionals about the diagnosis and treatability of depression so that a higher percentage of those affected can be treated.

Anxiety disorders.—Anxiety disorders are the most prevalent of all mental illnesses in this country, excluding substance abuse disorders. In recent years, highly effective behavioral, cognitive, and pharmacologic treatments have been developed. The Committee encourages continued research on the clinical course of anxiety disorders, the coexistence of other psychiatric disorders with anxiety, and combined psychosocial and pharmacological treatments.

Prevention.—The Committee continues to be supportive of prevention activities and urges NIMH to give priority to its prevention research agenda. Efforts should include psychological, environmental, and physiological focuses. Interdisciplinary efforts should be actively encouraged.

Services delivery.—The Committee expects NIMH to continue its research on mental health services delivery research, especially in the area of Alzheimer's disease. Research should continue to be directed to the mental health services and treatment modalities most appropriate to the problems associated with Alzheimer's disease and other mental disorders; the optimal range of services required; and the best methods for delivering those services.

The Committee continues to be supportive of the Mental Health Clinical Research Centers Program. These centers provide specialized research support services that enable investigators to conduct cost-effective and multidisciplinary studies for improving our understanding and treatment of major mental disorders.

The Committee also continues to be very supportive of NIMH research efforts targeted toward our Nation's minority population, and, in particular, the Minority Research Center Program.

The Committee also recommends continued funding for the research being conducted on the role of sleep in psychiatric illness.

The Committee has included $750,000 to establish a native Hawaiian mental health research and training center. Priority should be given to a center that can demonstrate the active participation of native Hawaiians in its research activities. An NIMH-sponsored report found that in comparison with statewide population estimates, native Hawaiians have a higher incidence of antisocial behaviors, including a higher proportion of assaultive acts; a higher rate of suicide among young adult and elderly males; a higher rate of child abuse and neglect; and other indicators of high stress. Further, there are very few native Hawaiian mental health professionals of any discipline, and those mental health services that do exist are not sensitive to the uniqueness of the native Hawaiian culture. The research and training center would conduct epidemiological and clinical research and train researchers and mental health service providers.

The Committee believes that it is important for the leadership of NIMH and the National Institute of Neurological and Communicative Disorders and Stroke to continue to explore areas in which projects of mutual interest can be supported. The Committee suggests that schizophrenia and issues relating to AIDS would be particularly productive and requests a report, prior to next year's hearings, describing areas that have been addressed collaboratively.

The Committee has been disappointed with NIMH's record in supporting nursing research and training programs and has expressed its concern about this orientation on numerous occasions. It is hoped that the new director will address this matter in the near future.

Mental health research training

The Committee recommendation includes $19,949,000 for mental health research training, which is the same as the budget request and $850,000 above the 1988 level. The House deferred consideration of this program. The Committee provides an additional $2,174,000 for NIMH research training in the AIDS portion of the ADAMHA account.

The Mental Health Research Training Program provides training grants to institutions and fellowships to individuals, at both the predoctoral and postdoctoral levels. In addition, there are special programs targeted to minorities: the Minority Fellowship Program; and the Minority Access to Research Centers [MARC] Program, which helps institutions with substantial minority enrollment prepare students for graduate study.

The Committee urges NIMH to place special emphasis upon the training of researchers in the fields of mental disorders of the aging, as well as schizophrenia. The Committee also urges NIMH to continue to give high priority to the Minority Fellowship program and the MARC program.

A recent ADAMHA report documents a decline in the participation of scientists under the age of 36 in ADAMHA and, particularly, NIMH research programs. The Committee is concerned about the implications of this finding for the future vitality of ADAMHA research, since it requires 5 to 10 years of post-baccalaureate education and experience to become a skilled researcher. Moreover, given that nearly 20 percent of the current pool of ADAMHA researchers are over age 55 and will reach normal retirement age within 10 years, the Committee believes that efforts must be made now to forestall significant shortages of researchers in the future. Therefore, the Committee directs ADAMHA to develop recommendations for addressing the shortage of young research scientists and to report to the Committee prior to next year's hearings.

The Committee requests that the Department's budget justification for the fiscal year 1990 request include a description of funding allocated to the Minority Fellowship and MARC Programs.

Mental health clinical training

The Committee recommends an appropriation of $14,500,000 for clinical training. This is $4,500,000 above the House allowance, $2,255,000 below the 1988 level, and $4,500,000 above the administration request.

The Committee continues to support the NIMH Clinical Training Program and disagrees with the Administration's proposal to phase it out. Demographic projections suggest that there will be a steady increase in the need for mental health personnel in each of the core disciplines who are trained to serve the seriously mentally ill, and mentally disabled elderly and minorities. Moreover, children with mental disorders are also seriously underserved, according to the Office of Technology Assessment.

As NIMH allocates clinical training resources to meet the needs of these high-priority populations, the Committee also directs that the funding be distributed on an equitable basis across the four core mental health professions and encourages the Institute to fund interdisciplinary programs. NIMH should also continue its prevention training initiative and support for the health professionals training program in the identification and treatment of alcohol and drug abuse. The Committee remains supportive of the State Human Resources Development Program and the Minority Fellowship Program.

The Committee would also be supportive of innovative projects, such as efforts to provide psychologists and social workers with training in medication issues. The Committee feels that such an approach would be especially useful in rural areas with serious shortages of mental health professionals.

The Committee has learned that NIMH is considering a new arrangement within the Institute to decentralize the administration of the Clinical Training Program and requests that NIMH consult with the Committee prior to any such modification.

Mental Health Community Support Program

The Committee recommendation includes $26,235,000 for the Mental Health Community Support Program, which is $7,087,000 above the fiscal year 1988 appropriation, and the same as the administration request. The House deferred consideration of this program.

This program supports demonstrations to explore effective methods of care for chronically mentally ill patients for whom long-term, 24-hour care in a hospital or protective facility is unnecessary or inappropriate, and to promote service system improvements for severely mentally disturbed children and youth.

Of the amount provided by the Committee, $13,821,000 would be used for projects directed toward the homeless who are seriously mentally ill. The sum of $12,414,000 would be used for demonstrations for adult and child populations. The Committee encourages continued funding of demonstration self-help projects and a self-help technical assistance center.

Homeless mental health services demonstrations

The Committee provides $4,650,000 for research demonstrations of mental health services to the homeless, the same as the administration request. The House deferred consideration of this program. No funds were provided for this activity in 1988.

These research demonstration grants were authorized by the Stewart B. McKinney Homeless Assistance Act to provide coordinated systems of mental health, social support, and housing services for the homeless and to test targeted approaches for homeless children and adolescents with severe emotional disturbances. In fiscal year 1987, $9,300,000 was appropriated for use over 2 years. The funding provided by the Committee will support continuation of the existing 18 projects for an additional year.

State comprehensive mental health services plans

The Committee provides $4,787,000 for the State Comprehensive Mental Health Services Plans Program, the same as the 1988 appropriation. The administration did not request funding for this program, and the House did not provide funding.

Grants are provided to States for the development of comprehensive plans to implement a community-based system of care for chronically mentally ill individuals. The Committee provides this funding for the second and final year of the program's authorization to ensure State compliance with the planning requirements in Public Law 99–660. Bill language has been included to provide these funds on a pro rata basis, as was done in the 1988 appropriations bill.

Protection and advocacy system for the mentally ill

The Committee has provided $13,000,000 for the program of protection and advocacy for the mentally ill. This amount is $2,445,000 higher than the 1988 appropriation, and $5,000,000 above the administration request. The House deferred consideration pending reauthorization. This program seeks to ensure that the rights of mentally ill individuals are protected while they are inpatients in treatment facilities and for 90 days following discharge from such facilities. The Committee's recommendation includes $200,000 for the Secretary of Health and Human Services to continue providing technical assistance to the States in implementing these programs.

Mental health direct operations

The Committee has provided $32,521,000 for mental health direct operations, which is the same as the administration's budget request and the fiscal year 1988 appropriation, and $1,000,000 below the House allowance.

The Institute's Direct Operations Program provides staff support for the administration of the grant and contract programs within extramural research, research training, and clinical training. It also provides staff and operating expenses to support the Community Support Program and protection and advocacy activities.

Drug abuse research

The Committee has provided $116,602,000 for non-AIDS drug abuse research, which is $12,707,000 more than the budget request and $8,698,000 more than the fiscal year 1988 appropriation. The House deferred action on this program.

NIDA funds intramural and extramural research on the causes and consequences of drug abuse, collects information on the incidence of drug abuse, and supports prevention and treatment research.

The Committee urges NIDA to give high priority to research to develop more effective drug abuse prevention and treatment programs. More information is needed regarding: how to encourage addicts to enter and remain in treatment programs; how to refine therapies according to characteristics of the addict, such as the presence of psychological disorders, and family and employment status; how to minimize patient relapse once formal treatment ends; and how to treat particular addictions, such as crack cocaine and PCP.

The Committee has been distressed by the lack of reliable, representative data regarding the incidence of drug abuse. NIDA's plan to augment the triennial household survey with a more frequent pilot telephone survey is encouraging, and the Committee looks forward to learning of the pilot's results. NIDA is also urged to study ways to modify the annual survey of drug use among high school seniors so that it reaches those of high school age who may not be in school. The Committee requests a report prior to the fiscal year 1990 hearings describing options for improving the high school senior survey and identifying the resources necessary to implement them.

The Committee would like to stress the importance of research into the behavioral and psychological factors that may cause drug dependence. Identification of these factors and the examination of questions such as individual differences in vulnerability to drug abuse and differences in behaviors among specific subpopulations are important in order to devise effective treatment and prevention techniques.

Drug abuse research training

The Committee has provided $2,400,000 for drug abuse research training, which is $102,000 more than the fiscal year 1988 appropriation, and the same as the administration budget request. The House deferred action on this program.

NIDA's Research Training Program supports pre- and postdoctoral training in medical schools, universities, and other institutions in the areas of basic, clinical, behavioral, and epidemiological research.

Drug abuse direct operations

The Committee has provided $15,229,000 for drug abuse program support. This amount is $2,800,000 above the budget request and $3,237,000 more than the 1988 appropriation. The House deferred consideration of this program. These funds support staff responsible for the administrative management of NIDA's research and training programs.

The Committee is pleased with the way the Office of Workplace Initiatives [OWI] has been implemented and has increased the direct operations budget by $2,800,000 above the administration request to ensure that it is adequately funded in fiscal year 1989. OWI has key responsibility for coordinating the implementation of the administration's program for a drug-free Federal workplace, which includes the development of drug testing programs within the Federal Government.

Alcoholism research

The Committee has provided $92,705,000 for non-AIDS alcoholism and alcohol abuse research. This amount is $18,407,000 more than the fiscal year 1988 appropriation and $9,624,000 above the administration's budget request. The House deferred consideration of this program.

The NIAAA research program focuses on improving the treatment and prevention of alcoholism and alcohol-related problems. Research is supported through project grants, the National Research Centers Program, contract studies in special areas of need, and an intramural program of biological and clinical research.

The Committee urges NIAAA to continue as one of its priorities research in the field of alcoholism and pregnancy. High priority should also be given to research on alcoholism treatment modalities, and the Committee expects NIAAA to use a portion of the funds provided above the administration request to increase research in this area.

The Committee is encouraged by reports of progress in research on a probable genetic basis for alcoholism. The Committee understands that several scientific conferences have been held on this subject, and that leading researchers believe that this is a propitious time to support a more concentrated research program on genetics. NIAAA is encouraged to use a portion of the funds provided above the administration request to move forward with multidisciplinary, collaborative research on personal and family risk factors, including biological markers and the identification of family subtypes, and the identification of specific genes and genotype-environment interactions.

The Committee is also supportive of research to investigate the behavioral determinants and factors associated with alcohol abuse and alcoholism. The behavioral aspects of alcohol abuse with respect to specific populations, such as American Indians, should be studied. Research is also needed to increase our understanding of adolescents and alcohol abuse in such areas as cognitive development and the effects of alcohol abuse on academic performance.

Because of the variety of research efforts underway in alcoholism and alcohol abuse and the rapid development of knowledge in this field, the Committee believes it would be useful for NIAAA to provide a report describing appropriate and desirable future research directions. The report should identify the areas of research to be emphasized over the next 10 years.

Alcoholism research training

The Committee has provided $2,651,000 for alcoholism research training. This is the same as the administration request, and $113,000 more than the appropriation for fiscal year 1988. The House deferred consideration of this program. The Committee provides an additional $183,000 for NIAAA research training in the AIDS portion of the ADAMHA account.

NIAAA research training support is provided through individual fellowships and grants to training institutions. Emphasis is placed on postdoctoral research training.

Homeless substance abuse demonstrations

The Committee provides $4,600,000 for homeless substance abuse research demonstrations, which is the same as the administration request. The House deferred consideration of this program. No funds were provided for this activity in 1988.

The research demonstration grants, authorized by the Stewart B. McKinney Homeless Assistance Act, test innovative approaches to community-based services programs for substance-abusing homeless persons. The projects include outreach services, supportive living programs, case management, prevention interventions, and training for service providers. The sum of $9,200,000 was appropriated for the demonstrations in 1987, to remain available for a 2-year period. The $4,600,000 provided by the Committee for 1989 will support the continuation of the 10 existing projects for an additional year.

Alcoholism direct operations

The Committee has provided $9.278,000 for alcoholism direct operations. This is the same as the administration request and the appropriation for fiscal year 1988. The House deferred consideration of this program. The funds support staff responsible for the management of the extramural research and research training programs, as well as the grant and contract review process.

Treatment outcome research

The Committee provides $2,310,000 for treatment outcome research, which is the same as the administration request. The House deferred consideration of this program. No funds were provided for this activity in 1988. The sum of $2,310,000 was appropriated in 1987 as part of the Anti-Drug Abuse Act. Grants were awarded in 1988.

This research is designed to evaluate the most effective forms of alcohol and drug abuse treatment, such as inpatient versus outpatient, for specific patient groups, such as cocaine abusers. Funding in 1989 will be used to assess outcomes according to the interaction of patient characteristics and treatment modality, setting and provider.

Buildings and facilities

The Committee concurs with the administration's request and the House allocation in providing $200,000 for buildings and facilities, $9,000 more than the appropriation for fiscal year 1988.

This activity provides funds for repair and improvement of all ADAMHA intramural facilities. Funds will be used in 1989 for routine operation and maintenance repairs.

Program management

The Committee has provided $9,489,000 for ADAMHA program management. This is the same as the budget request and the House allowance, and $1,969,000 more than the appropriation for fiscal year 1988. The program management activity provides support for the Office of the Administrator, which is responsible for providing policy guidance, coordination, and general support services to the three ADAMHA institutes. The office also administers the ADAMHA block grant programs.

The Committee is concerned that the percentage of women and minorities being appointed to ADAMHA advisory committees has decreased during the past several years. The Committee questions the Department's view that there are insufficient numbers of qualified women and minorities who should be considered, merely because the advisory committees are becoming more narrowly focused in their mission. The Committee was pleased to learn that the Administrator has asked that greater consideration be given to nominating such professionals and expects the agencies to aggressively pursue such appointments.

ST. ELIZABETHS HOSPITAL

1988 comparable appropriation	$65,402,000
1989 appropriation request	24,000,000
House allowance	24,000,000
Committee recommendation	24,000,000

The Committee has provided $24,000,000 for St. Elizabeths Hospital. This is the same as both the administration budget request and the House allowance, and $41,402,000 less than the fiscal year 1988 appropriation.

The District of Columbia has assumed responsibility for the operation of St. Elizabeths Hospital, pursuant to the transfer mandated in Public Law 98–621, the St. Elizabeths Hospital and District of Columbia Mental Health Services Act. As a result, the Federal appropriation is now a transitional payment to the District. The final transitional payment will be made in fiscal year 1991.

The $24,000,000 provided is the maximum transitional payment authorized by law. St. Elizabeths Hospital continues to be eligible to receive payments from three other Federal sources: Medicare, Medicaid, and reimbursements for the care of Federal beneficiaries.

OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH

PUBLIC HEALTH SERVICE MANAGEMENT

1988 comparable appropriation	$58,280,000
1989 appropriation request	82,789,000
House allowance	67,144,000
Committee recommendation	69,903,000

The Committee recommends an appropriation of $69,903,000 for the Public Health Service management activity. This is $12,886,000 less than the administration request, $2,759,000 more than the House allowance, and $11,623,000 more than the comparable fiscal year 1988 appropriation of $58,280,000.

The Public Health Service management appropriation supports the two major responsibilities of the Office of the Assistant Secretary for Health [OASH]. The first of these functions is the leadership and direction of the Public Health Service [PHS] agencies. Plans and strategies for accomplishing national health goals are formulated in cooperation with the agencies for implementation throughout PHS. The second major function is the operation of several high-priority programs within OASH that have a variety of missions and responsibilities.

Health services research and technology assessment

The Committee recommends an appropriation of $19,500,000 for Health Services Research and Technology Assessment Program operations, together with a Medicare trust fund transfer of $8,550,000, for a total budget of $28,050,000. This total is $8,500,000 more than the administration's request and $6,874,000 greater than the fiscal year 1988 appropriation.

This program seeks to create new knowledge and a better understanding of the processes by which health services are made available, and how they may be provided more efficiently, more effectively, and at lower cost. Funds are used to evaluate health services, assess technologies, and improve access to new scientific and technical information for research users.

Extramural research projects are selected for funding based on scientific merit and their potential for improving the cost effectiveness and quality of health services. Intramural research activities in fiscal year 1988 include expanding and updating the national medical expenditure survey, which will provide national estimates of the use of, and expenditures for, health care services and health insurance coverage.

Rural health research

The Committee recommendation includes $1,000,000 to the National Center for Health Services Research [NCHSR] to begin research on the congressionally mandated rural health research agenda developed by the National Center for Health Services Research. The Committee was pleased to receive the agenda, which details necessary research that should be conducted in rural health.

The Committee is interested in developing the capacity of educational institutions located near rural areas to conduct rural health research. In addition to funding rural health research, the Committee urges that NCHSR provide assistance through workshops, written materials or other methods to institutions of higher education and research organizations primarily concerned with rural health care.

Patient outcomes research

The Committee is concerned over studies showing wide variations in the scope and extent of medical care being furnished in the United States. Of particular concern is the lack of a sufficient knowledge base to guide clinical decisions, and whether or not this may be resulting in unnecessary or inappropriate medical practices and procedures. Last year, the Committee provided initial funding for an organized research program to systematically evaluate the outcomes of medical care. Given the importance of this issue, both in terms of quality and cost, the Committee has recommended a transfer of $7,500,000 from the Medicare trust funds to carry out a national program for the assessment of patient outcomes.

The Committee recommendation includes funding for the national medical expenditure survey [NMES]. The Committee has once again included bill language directing the Department to transfer up to $10,155,000 from the evaluation fund available under section 2313 of the Public Health Service Act for the support of NMES. The section 2313 funds, in conjunction with the funds provided in the center's budget, will assure full funding for this survey.

The Committee recommendation includes $1,680,000 for program support for NCHSR. This is the same as the administration's budget request and $48,000 above the fiscal year 1988 appropriation. These funds support the planning, coordination, and management of the various health service research programs.

Adolescent family life

The Committee recommends an appropriation of $9,645,000 for the Adolescent Family Life [AFL] Program. This is the same as the administration request and $15,000 more than the fiscal year 1988 appropriation. This program was not considered by the House. The authorization for this program expired September 30, 1985. The objective of AFL is to develop effective family-centered demonstration models designed to help prevent adolescent pregnancy and to alleviate its health, social, psychological, and economic consequences.

Disease prevention and health promotion

The Committee recommends $3,486,000 for disease prevention and health promotion. This is $486,000 more than the administration request, $1,014,000 less than the House allowance and the same as the fiscal year 1988 appropriation. The disease prevention and health promotion activity facilitates the collaboration between both Federal and non-Federal groups to develop and implement national strategies and programs to prevent disease and disability and promote good health.

In fiscal year 1989, the activities of the Office of Disease Prevention and Health Promotion include sponsoring the work of the U.S. Preventive Services Coordinating Committee, disseminating the work of a task force on delivery of preventive services in medical treatment settings, leading an interdepartmental committee in carrying out dissemination and technical assistance to the Nation's school systems to improve and expand health and physical education, and collaborating with private foundations to carry out a nationwide public education program aimed at weight control.

Physical fitness and sports

The Committee recommends an appropriation of $1,499,000 for physical fitness and sports activities. This is the same as the administration request, the House allowance, and $110,000 more than the fiscal year 1988 appropriation.

The Physical Fitness and Sports Program provides staff support and assistance for the President's Council on Physical Fitness and Sports. Through continuing contact with national governing bodies, the Council seeks to enlist the active support and assistance of individuals, civic groups, professional associations, sports groups, and others to promote and improve the health of all Americans through regular participation in physical fitness and sports.

The fiscal year 1989 appropriation will provide program emphasis on developing cosponsored projects designed to train teachers and volunteers in the administration of appropriate exercise programs for various target populations, including older people and the handicapped.

The Committee is concerned with reports that American youths are 19th in the world in physical fitness. The Committee directs the Council to report to the Committee, by February 1989, as to what additional efforts are required to improve this situation.

Minority health

The Committee recommends an appropriation of $3,000,000 for the Office of Minority Health. This amount is $128,000 more than the administration request, the House allowance, and the comparable appropriation for fiscal year 1988.

The Office of Minority Health was created from the Secretary's Task Force on Black and Minority Health which documented over 60,000 excess deaths per year among Asian/Pacific Islanders, blacks, Hispanics, and native Americans. The task force identified six causes that contribute to 80 percent of those excess deaths: cancer, cardiovascular disease and stroke, chemical dependency, diabetes, violence, and infant mortality. The task force developed recommendations to improve the health of these Americans and reduce the number of excess deaths. The Office of Minority Health is the focal point for the implementation and monitoring of these recommendations and for the formulation and development of policy issues affecting minority health.

The Committee believes that minority community-based organizations are often in the best position to access and help educate minority populations on AIDS. The Committee directs the Centers for Disease Control to consult with and jointly coordinate AIDS activities with the

Office of Minority Health to target AIDS information and education to minorities.

Public Health Service management

The Committee recommends an appropriation of $19,175,000 for Public Health Service management activities. This is $836,000 more than the fiscal year 1988 appropriation, the House allowance, and $500,000 more than the administration request.

The Public Health Service management activity provides funding for the offices that support the Assistant Secretary for Health in providing leadership and direction to the Public Health Service [PHS]. In recent years, the programs and responsibilities of PHS have expanded in size and in complexity. Congress has appropriated additional funds to meet these increasing requirements. However, the resources available for management oversight and coordination have not been increased accordingly and, in fact, have been reduced.

The Committee feels that in order to effectively manage the diverse and complex programs of PHS, the staff and dollar resources available to the Assistant Secretary for Health must be restored. Therefore, the Committee allowance includes $19,175,000 and 290 full-time equivalents for the PHS management activity.

Acquired immune deficiency syndrome [AIDS]

The Committee recommends $13,598,000 for AIDS-related activities. This is $9,290,000 more than the fiscal year 1988 appropriation, $7,500,000 less than the House allowance and $15,000,000 less than the administration request.

The Committee recommendation includes $7,000,000 for health services research, $3,500,000 for the Office of Minority Health, and $3,098,000 for the National AIDS Program coordination activity. No funds are provided for a contingency fund.

The health services research funding will focus on three areas: total health services costs, distribution of financial burden among payers, and the cost-effectiveness of delivering medical, social, and support services.

The Committee has provided an additional $2,000,000 to the Office of Minority Health to continue its efforts to organize and coordinate, with the Centers for Disease Control [CDC], an AIDS education and prevention effort which focuses on working with community-based organizations.

The National AIDS Program coordination staff advises the Secretary of Health about, and provides coordination for, the Public Health Service AIDS activities.

Child survival activities

The Committee concurs with the House in providing a general provision to exempt not more than 60 employees of the Public Health Service from all FTE limitations to assist in child survival activities in underdeveloped countries. It is estimated that there are 10 million preventable deaths of children from vaccine-preventable diseases and dehydration each year in these underdeveloped countries. The Committee has received testimony that the Public Health Service is the only organization with the required talent and expertise to assure success in these programs funded by organizations outside HHS. The Committee does not believe that the PHS should be penalized for assisting in the U.S. foreign policy of providing humanitarian aid to developing countries.

RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS

1988 comparable appropriation	$89,859,000
1989 appropriation request	107,687,000
House allowance	102,687,000
Committee recommendation	102,687,000

The Committee concurs with the House in recommending an appropriation of $102,687,000 for commissioned officer retirement pay and medical benefits. This is $5,000,000 below the budget estimate and $12,828,000 more than the fiscal year 1988 appropriation.

This is an indefinite appropriation account. This activity provides for mandatory payments to Public Health Service commissioned officers who have retired for age, disability, or specified period of service in accordance with provisions of law. Provision is also made for the cost of medical care provided in non-Public Health Service facilities to dependents of the Public Health Service Commissioned Corps. The Committee did not approve the budget request to transform this account from an indefinite to a definite appropriation, including a contingency reserve of $5,000,000. There seems to be no compelling reason for doing this.

VACCINE INJURY COMPENSATION TRUST FUND

The Committee concurs with the House in providing bill language, requested in the budget, to enable the vaccine injury compensation trust fund to pay claims in 1989. In addition, the Committee concurs with the House in permitting payment of retroactive claims from the trust fund in 1989. However, the Committee has deleted bill language that provides reimbursement of administrative expenses from the trust fund. The Committee has provided funding for administrative expenses in the Centers for Disease Control appropriation.

HEALTH CARE FINANCING ADMINISTRATION

GRANTS TO STATES FOR MEDICAID

1988 comparable appropriation	$30,656,932,000
1989 appropriation request	32,732,589,000
House allowance	32,732,589,000
Committee recommendation	34,236,000,000

The Committee recommends $34,236,000,000 for grants to States for Medicaid. This amount is $3,579,068,000 more than the fiscal year 1988 appropriation, and $1,503,411,000 more than the administration's budget request and the House allowance. This amount includes $8,000,000,000 appropriated in fiscal year 1988 as an advance for fiscal year 1989. This recommendation reflects the latest current law estimates.

The Medicaid Program, which is administered by each of the 50 States, the District of Columbia, Puerto Rico, and the territories, provides medical care for certain low-income individuals and families. Federal funds for medical assistance are made available to the States on the basis of a formula which determines the appropriate rate at which State program costs should be matched. The matching rate may range from 50 to 83 percent, depending on the State's average per capita income relative to the national per capita income.

Each Medicaid Program must provide a basic package of medical services including inpatient and outpatient hospital care, health screening services to children under 21, skilled nursing facility care for persons 21 years of age or older, and physician services.

AIDS drug coverage

The Committee is disappointed to learn that not all States are covering the cost of azidothymidine [AZT] under their Medicaid program. When Congress appropriated $30,000,000 for the public health emergency fund in the fiscal year 1987 supplemental appropriations bill, it encouraged States to act quickly to provide Medicaid coverage for AZT and any other drugs which prove to prolong the life of a person with AIDS. The Committee understands, however, that there are still some States that do not provide coverage. Therefore, the Committee directs HCFA to do all that it can to encourage and assist States in including the cost of life prolonging AIDS drugs under their medicaid programs.

Medicaid voluntary contributions rule

Currently, several States have exercised an option to include funds donated from private sources as a part of the State contribution to Medicaid expenditures. These funds are eligible, along with regularly appropriated State funds, to be matched by the Federal Medicaid contribution at the normal State matching rate. Typically, these contributions have come from local governments and from individuals. In some cases, hospitals have contributed to State indigent care pools with the funds used to expand Medicaid support for indigent patients.

It has come to the attention of the Committee that new regulations regarding this so-called voluntary contribution rule are now being drafted by the Department, and may soon be proposed for public comment. While the Committee recognizes that development of guidelines to prevent abuses of the current rule may be prudent, the Committee is concerned about the possible implications of new regulations which could have the effect of reversing positive steps taken by several States to expand Medicaid support for indigent care and for pregnant women and children.

The Committee, therefore, would like to ask the Department to report back to the Committee with a draft copy of these regulations prior to publication in the Federal Register. These regulations would, therefore, be subject to Committee review prior to public comment. Any substantive changes to these regulations made at the suggestion of the Committee are to be incorporated into the final regulations issued by the Department.

ADVANCE APPROPRIATION

The Committee has provided an advance appropriation of $9,000,000,000 for the first quarter of fiscal year 1990. This recommendation reflects the latest available current law estimates.

PAYMENTS TO HEALTH CARE TRUST FUNDS

1988 comparable appropriation	$25,893,000,000
1989 appropriation request	32,100,000,000
House allowance	31,227,000,000
Committee recommendation	31,227,000,000

The Committee has provided $31,227,000,000 for payments to health care trust funds. This amount is $873,000,000 less than the administration's request, the same as the House allowance, and $5,334,000,000 more than the fiscal year 1988 appropriation.

The Committee recommendation is consistent with the latest current law estimates for the three mandatory activities which comprise these payments: supplementary medical insurance; hospital insurance for the uninsured; and the Federal uninsured payment.

The Committee has provided $30,712,000,000, which is $873,000,000 less than the administration request and the same as the House allowance, for the payment to the supplementary medical insurance trust fund. This payment provides matching funds for premiums paid by Medicare part B enrollees. The increase of $5,294,000,000 over fiscal year 1988 reflects adjustments related to increases in the cost of services paid for by this trust fund, growth in the enrollee population, and increases to the contingency margin.

The Committee recommendation includes $493,000,000 for hospital insurance for the uninsured, which is the same as the administration's request and the House allowance, and $32,000,000 more than the fiscal year 1988 comparable appropriation. This payment reimburses the hospital insurance trust fund for Medicare benefits to individuals who have not met the insured status requirement.

The recommendation also includes $22,000,000 for the Federal uninsured benefit payment, which is the same as the administration's request, the House allowance, and $8,000,000 more than the comparable fiscal year 1988 appropriation. This payment reimburses the hospital insurance trust fund for the cost of benefits provided to Federal annuitants now eligible for Medicare.

PROGRAM MANAGEMENT

1988 comparable appropriation	$98,211,000
1989 appropriation request	95,246,000
House allowance	93,817,000
Committee recommendation	94,417,000

The Committee recommends an appropriation of $94,417,000 for Health Care Financing Administration [HCFA] program management. This amount is $829,000 less than the administration's request, $600,000 more than the House allowance, and $3,794,000 less than the fiscal year 1988 appropriation.

The bill provides $1,839,819,000 in trust funds. This amount is $64,263,000 more than the administration request, $69,900,000 more than the House allowance, and $466,234,000 more than the fiscal year 1988 appropriation.

Research, demonstration, and evaluation

The Committee has provided $32,000,000 for HCFA research, demonstration, and evaluation activities. This is the same as the administration request, $2,000,000 more than the House allowance, and $5,193,000 more than the fiscal year 1988 appropriation.

HCFA conducts studies and evaluations to measure the impact of the Medicare and Medicaid Programs on health care costs, and to produce information on alternative strategies for reimbursement, coverage, and program management. These studies are conducted with the goal of improving the administration of the Medicare and Medicaid Programs.

The recommended funding level will provide for the continuation of research, demonstration, and evaluation activities, as well as for the startup of new projects, including those mandated by Congress. Priority areas of research include quality of care measurements, physician payment methodology, and private health plan options.

Medicaid study

Some 35 to 37 million Americans are without health insurance, even with the inclusion of public programs like Medicaid and Medicare. In fiscal year 1985–86, 2½ million individuals, mostly women and children, filed applications for assistance and were denied AFDC and Medicaid benefits. Another 950,000 withdrew applications prior to eligibility determinations. The Committee has been made aware through a recently released study by the Southern Governors' Association that of the millions of indigent individuals who are denied AFDC and Medicaid benefits annually, 60 percent are denied not because of income or resource requirements, but due to failure to comply with procedural requirements. The reasons for the large percentage of applicants who fail to complete the application process is unknown. Congressional efforts to provide assistance to the uninsured and to improve infant mortality and low birth weight are being stymied by the AFDC/Medicaid eligibility process. Expansion of Medicaid eligibility to pregnant women and infants, even with presumption of eligibility, does not get these individuals into health care if they do not qualify for Medicaid.

The Committee urges funding of a study to determine the nature of the eligibility process. This study should also investigate the impact of error rate sanctions on the significant increase in the percentage of denials due to failure to comply with procedural requirements. Face to face interviews should be conducted, and income and resource information maintained in case files but not available to computer files should be collected, to determine the following: the reasons for the high rate of denials for failure to comply with procedural requirements; the reasons for withdrawals from the application process; and the range of excess income or excess resources.

Rural health research

The Committee notes that Public Law 100–203 mandated that the Health Care Financing Administration set aside not less than 10 percent of the funds expended on research and demonstrations for projects related substantially or exclusively to rural health. The Committee further notes that HCFA is required to issue an annual report detailing expenditures on these rural health research and demonstration projects. The Committee expects that 10 percent of the total funds provided to the Office of Research and Demonstrations shall be dedicated to rural projects, both research and demonstrations. The Committee requests the Administrator to submit a copy of the annual report detailing the 10-percent set-aside requirement.

Rural hospital transition grants

The Committee recommends $15,000,000 for the Rural Health Care Transition Program, authorized by section 4005(e) of the Omnibus Budget Reconciliation Act of 1987, Public Law 100–203. This is $12,000,000 more than the House allowance. There was no administration request for this program.

This program is designed to assist rural hospitals with fewer than 100 beds to modify their services in order to maintain access to health care for Medicare beneficiaries. Grants of up to $50,000 for 2 years would be awarded to such hospitals to develop transition strategies enabling them to remain fiscally viable, while maintaining access to health care for local residents.

Medicare contractors

The Committee recommends $1,551,000,000 for Medicare contractors. This amount is $47,600,000 more than the administration request and the House allowance, and $319,140,000 more than the fiscal year 1988 appropriation. The Committee has included $100,000,000 of the administration request in a contingency fund. The amount provided also includes $160,000,000 for implementation and administration of the Catastrophic Health Program.

The administration requested and the House supported $112,400,000 for the management of the Catastrophic Insurance Program for fiscal year 1989. This estimate was based on projected enactment of an earlier version of the legislation. Subsequently, the conference report of H.R. 2470, which included several revisions to the earlier bill, passed the Senate June 8, 1988, requiring a reestimate of funding for administrative requirements. Therefore, the Committee is providing $160,000,000 for implementation costs in fiscal year 1989. The Committee is providing additional funds for unanticipated requirements. These actions are taken to ensure that the program is administered efficiently and at the lowest cost possible.

The Medicare Program is primarily administered by the Medicare contractors who are responsible for reimbursing Medicare beneficiaries and providers in a timely and fiscally responsible manner. These contractors, usually insurance companies, provide information, guidance, and technical support to both providers of services and beneficiaries on the administration of the Medicare Program.

The Committee continues to believe that, in the management of the contractor program, first priority should be given to the quality and timeliness of the claims processing functions.

The Committee has included bill language and a $103,000,000 increase for payment safeguard activities. The Committee directs that the fiscal year 1989 funds be allocated and obligated to the contractors as soon as possible to pay claims promptly.

Medicare beneficiary education

The Catastrophic Health Care Coverage Act recently approved by Congress makes extensive changes in the Medicare program. As a result, beneficiaries will require assistance in understanding these programs and how the addition of new benefits will affect them. The catastrophic legislation recognizes the necessity to educate the 31 million Medicare beneficiaries about the new and expanded benefits and authorizes a 3-year demonstration project for the purpose of training volunteers to provide counseling to Medicare beneficiaries.

The Committee acknowledges the need for a comprehensive beneficiary education program. Therefore, the Committee recommends that within the catastrophic insurance administration funds, $1,000,000 be used for the establishment of a demonstration project for the purpose of training volunteers to provide counseling and assistance to Medicare beneficiaries in each of the 50 States. Funds shall be used for (1) the training of volunteers, (2) reimbursement to volunteers for transportation, meals and other expenses incurred by them during training or in providing counseling services and (3) administration of the program. It is the Committee's intent that this demonstration project be administered by a private or public nonprofit organization and that the Secretary carefully consider utilizing existing volunteer training programs.

State certification

The Committee recommends $66,235,000 for HCFA State certification activities in fiscal year 1989. This amount is $4,000,000 more than the administration request and the House allowance, and $8,313,000 more than the fiscal year 1988 appropriation. The additional funds provided by the Committee over the administration's request will allow States to procure approximately 1,500 laptop computers. These computers are to be used by State surveyors when entering data with regard to a facility's ability to meet Federal conditions of participation.

Funds transferred from the Medicare trust fund for this activity are used to insure that hospitals and institutions providing care to Medicare beneficiaries maintain acceptable levels of health and safety. The amount provided will allow for the survey of approximately 69 percent of all facilities requesting Medicare eligibility, including 100 percent coverage of all skilled nursing care facilities and hospices.

The Committee has provided a $4,224,000 direct appropriation for State certification program support. This amount is $600,000 more than the administration's budget request and the House allowance, and $3,713,000 less than the fiscal year 1988 appropriation. Of this amount $3,624,000 is to be used for surveying and providing other Federal oversight of approximately 617 psychiatric hospitals for Medicare and Medicaid certification, as requested by the administration. Surveys funded under this appropriation determine compliance with two statutory requirements relating to medical records and staffing. These standards are designed to help measure whether certified psychiatric hospitals are providing active treatment. The Committee is also providing $600,000 to provide contract support to develop and implement surveyor training enhancements as mandated by the Omnibus Budget Reconciliation Act of 1987. This includes the development and validation of a surveyor training and test program in the conduct of standard and extended surveys together with the development of a program for nurse aide training and competency evaluation.

Clinical laboratory quality

The Committee is concerned about the failure of HCFA to adequately regulate the quality of clinical laboratory testing in the Medicare and CLIA programs. The tragedy of this poor enforcement is that thousands of Americans are receiving inaccurate test results, causing increased health costs, inadequate treatment due to misdiagnosis, and tragically, in some instances, even death.

As a result, the Committee directs the Department to report to Congress every 90 days on their progress in the implementation of a system to assure the quality of clinical laboratory testing. The first such report shall be due on November 1, 1988. This report should include, but not be limited to: the specific deadlines for publication of proposed and final revised standards for clinical laboratories; office laboratories; indication of the vigorous enforcement of existing and future standards for clinical laboratories; ensuring adequate consumer protection; and monitoring of State and private sector programs to assure compliance with Federal standards of assuring quality.

Federal administration

The Committee recommends $80,193,000 in Federal funds and $185,584,000 in trust funds for a total of $265,777,000 for Federal administration. The recommendation is $3,766,000 less than the administration request, $4,300,000 more than the House allowance, and $13,507,000 more than the fiscal year 1988 appropriation of $252,270,000.

Administrative law judge hearings

In 1987, consideration of the Health Care Financing Administration's [HCFA] request for funds to implement an administrative law judge [ALJ] process was deferred pending the submission of a General Accounting Office [GAO] report to Congress. GAO submitted its report in April 1988. The Committee agrees with GAO's recommendation for a pilot and evaluation of HCFA's proposed process before final implementation of the process is approved.

The administration requested $8,066,000 and 154 FTE's for the implementation of an administrative appeals process. The Committee has provided $4,300,000 and 50 FTE's to HCFA to establish a pilot project to conduct part B hearings and appeals on denied Medicare claims. The Committee has included bill language to permit the Administrator of HCFA to hire persons who meet the qualifications for appointment of ALJ's under 5 U.S.C. 3105 at the GS–14 grade level but that such appointments shall terminate not later than March 31, 1990. If HCFA establishes a permanent ALJ unit for denied part B claims, it is expected that those persons given temporary ALJ appointments shall have their appointments converted to a permanent status.

HCFA is charged with the responsibility of protecting the due process rights of all claimants. Furthermore, the Committee understands that HCFA will be offering telephone hearings on a strictly optional and voluntary basis.

The Committee expects HCFA to provide ALJ hearings for no more than 25 percent of the total Medicare benefit hearing requests filed on or after October 1, 1988. The Committee further expects HCFA to obtain an independent evaluation of the pilot in line with GAO's recommendation in this area. HCFA's Administrator is directed to submit an interim report to the Committee by May 1, 1989, and to submit a final report to the Committee by September 1, 1989.

The Committee has included bill language to permit the hiring of administrative law judges [ALJ's] on a temporary basis for the pilot as ALJs normally have life tenure pursuant to the Administrative Procedure Act.

There is precedent both for the temporary hiring of ALJ's and their hiring at a GS–14 level. The supplemental appropriations bill passed in December 1971 provided for the temporary hiring of hearing officers for the Black Lung Program. (The hearing officer position has since been renamed administrative law judge.) Unlike the current language, that bill also permitted the hiring of persons who did not meet the qualifications for appointment under 5 U.S.C. 3105.

Secretary shortage

The Committee directs the Administrator to increase by 40 the number of secretaries to be hired by the Health Care Financing Administration [HCFA] at its Woodlawn facility in Baltimore County, MD. The current secretary shortage is adversely affecting the efficient functioning of the agency and needs to be dealt with immediately.

The Committee believes that HCFA has failed to respond properly to last year's report language on this matter. Because of HCFA's failure to move expeditiously on this matter, the Committee directs HCFA to report to the Committee every 90 days on the progress it is making toward the 50-secretary level at Woodlawn. The first report shall be due on November 1, 1988.

Provider reimbursement review board

The Committee is aware of a staffing shortage of up to 16 percent for HCFA's provider reimbursement review board. The Committee is concerned that since HCFA is a standing party in all cases before the Board, there is the potential for at least an appearance of a conflict of interest due to HCFA's unwillingness to provide the Board with adequate staff. As a result, the Committee directs the GAO to conduct a study of this problem and report to the Committee on its findings by January 15, 1989.

SOCIAL SECURITY ADMINISTRATION

PAYMENT TO SOCIAL SECURITY TRUST FUNDS

1988 comparable appropriation	$105,298,000
1989 appropriation request	93,631,000
House allowance	93,631,000
Committee recommendation	93,631,000

The Committee recommends an appropriation of $93,631,000 for payments to Social Security trust funds, the same as the administration request and the House allowance. The recommendation is $11,667,000 less than the fiscal year 1988 appropriation of $105,298,000.

These funds reimburse the old-age and survivors insurance and disability insurance trust funds for special payments to certain uninsured persons, pension reform, and unnegotiated checks. This appropriation restores the trust funds to the same financial position they would have been in had they not borne these costs, properly charged to the general funds.

The Committee did not consider the $85,275,000 advance appropriation request for fiscal year 1990 as requested in the President's budget. The House likewise recommended funds for fiscal year 1989 only.

SPECIAL BENEFITS FOR DISABLED COAL MINERS

1988 comparable appropriation	$663,452,000
1989 appropriation request	628,581,000
House allowance	628,581,000
Committee recommendation	628,581,000

The Committee recommends an appropriation of $628,581,000 for special benefits for disabled coal miners, which is in addition to the $250,000,000 appropriated last year as an advance for the first quarter of fiscal year 1989. The recommendation is $34,871,000 less than the comparable fiscal year 1988 amount of $663,452,000 and the same as the House allowance.

These funds are used to provide monthly benefits to coal miners disabled by black lung disease and to their widows and certain other dependents, as well as to pay related administrative costs.

The 1989 decrease of $34,871,000 reflects the continuing decline in the number of beneficiaries receiving payments, since Social Security's major responsibility is for claims filed before June 1973, and the Department of Labor has responsibility for claims filed after that date. The effect of the decline in beneficiaries is partially offset by a 2-percent benefit increase projected for 1989. Black lung benefit levels are tied directly to Federal pay increases.

The administration also requested, but the Committee did not consider, a full-year appropriation for fiscal year 1990 and an advance appropriation for the first quarter of fiscal year 1991. The Committee recommends an advance of $211,000,000 for the first quarter of fiscal year 1990, the same as the House allowance.

SUPPLEMENTAL SECURITY INCOME

1988 comparable appropriation	$9,806,340,000
1989 appropriation request	9,473,953,000
House allowance	9,473,953,000
Committee recommendation	9,473,953,000

The Committee recommends an appropriation of $9,473,953,000 for supplemental security income [SSI], which is in addition to the $3,000,000,000 appropriated last year as an advance for the first quarter of fiscal year 1989. The recommendation is $332,387,000 less than the comparable fiscal year 1988 amount of $9,806,340,000 and the same as the administration request and the House allowance.

These funds are used to pay benefits under the SSI Program, which was established to ensure a Federal minimum monthly benefit for aged, blind, and disabled individuals, enabling them to meet basic needs. In many cases, SSI benefits supplement income from other sources, including Social Security benefits. The funds are also used to pay costs of administering the program, to reimburse State vocational rehabilitation services for successful rehabilitation of SSI recipients, and to support the referral and monitoring of certain disabled SSI recipients who are drug addicts or alcoholics.

The Committee notes that the Congressional Budget Office has a higher current law estimate for this entitlement program, but bill language provides automatic drawdown authority should additional amounts become necessary.

The administration also requested, but the Committee did not consider, a full-year appropriation for fiscal year 1990 and an advance appropriation for the first quarter of fiscal year 1991. The Committee recommends an advance of $2,936,000,000 for the first quarter of fiscal year 1990, the same as the House allowance.

LIMITATION ON ADMINISTRATIVE EXPENSES

1988 comparable appropriation	$3,524,114,000
1989 appropriation request	3,775,661,000
House allowance	3,705,000,000
Committee recommendation	3,820,000,000

The Committee recommends a limitation on administrative expenses of $3,820,000,000, an increase of $44,339,000 over the administration request and $115,000,000 over the House allowance. This recommendation is $295,886,000 more than the fiscal year 1988 appropriation of $3,524,114,000.

This account provides resources from the Social Security trust funds for the Social Security Administration to administer the Social Security retirement and survivors and disability insurance programs, certain Social Security health insurance functions, and the construction needs of the trust fund programs. As authorized by law, it also provides resources from the trust funds for certain nontrust fund administrative costs, which are reimbursed from the general funds. These include administration of the supplemental security income program for the aged, blind, and disabled; work associated with the Pension Reform Act of 1974; and the portion of annual wage reporting work done by the Social Security Administration for the benefit of the Internal Revenue Service. The dollars provided also support automated data processing activities.

The fiscal year 1989 recommendation includes $97,870,000 for the contingency reserve, the same as the House allowance, and $50,000,000 more than the budget request and fiscal 1988 level. The recommendation also includes an increase for additional staff resources over the requested level, as well as a reduction from data processing and telecommunications, specified later. The Committee did not consider the $3,765,870,000 advance appropriation request for fiscal year 1990 as requested in the President's budget. The House likewise recommended funds for fiscal year 1989 only.

The Committee received a report from the General Accounting Office in May 1988 which noted that by the end of fiscal year 1988, the Social Security Administration expects to have reduced its staff by 11,600, or about 68 percent of the planned 6-year reduction of 17,000 through 1990. In addition to the General Accounting Office report, the Health and Human Services Office of the Inspector General reported that its survey of Social Security Administration clients in early 1988 showed that they continued to be satisfied with the service they received. However, while the inspector general did not identify extensive service deterioration, Social Security Administration's supervisors and employees continued to express concern about the effect of current and future staff reductions. Moreover, the General Accounting Office study showed that the process accuracy error rate for the Social Security retirement and survivors insurance program increased from 23 percent in fiscal 1985 to 31.5 percent in fiscal year 1987; this was the period when most of the staffing cuts occurred.

The General Accounting Office is continuing to monitor the Social Security Administration's service and will report soon to the Committee the results of its mid-1988 test of accessibility to the Social Security Administration by telephone. The General Accounting Office is also obtaining the views of the Social Security Administration's employees and managers on the quality of service as of mid-1988 and will report the results to the Committee.

The Committee remains deeply concerned about the potential impact of continuing staff reductions on the Social Security Administration's service to the public. The Committee requests the General Accounting

Office to continue monitoring the situation and to provide a report by May 15, 1989.

The Committee has restored 1,500 full-time equivalent [FTE] positions proposed to be eliminated by the President's budget, and included bill language establishing a statutory floor of 66,545 FTE in fiscal year 1989. The limitation has been increased $90,000,000 over the budget request to restore these positions, offset by the $50,000,000 increase in the contingency fund. The Committee expects these resources to be sufficient to forestall further downsizing in fiscal 1989.

The Committee also requests that the Social Security Administration report to the Committee by March 1, 1989, and September 1, 1989, on its service performance data. The March 1 report should include data for the quarters ending September 30, 1988, and December 31, 1988, and compare performance to prior quarters and to the same quarter in the two prior fiscal years. The September 1 report should contain data and a similar comparison for the quarters ending March 31, 1989, and June 30, 1989. Where significant changes have occurred, explanation of the reasons for the change should be provided. Data on process accuracy should disclose the incidence of all cases in error, identifying both those resulting in erroneous payments and those which did not. The report should also disclose how the Social Security Administration plans to monitor accuracy in field offices, if it proceeds to reduce the size of its quality assurance sample as it has indicated it would.

The Committee would also like to receive with the service performance data, information on the Social Security Administration's staffing. Such information should include the number of staff on duty at the end of the most recent quarter for major Social Security Administration components; field and hearings offices (by region; field offices by position); and each program service center. Current fiscal year workyear usage through the most recent quarter should be reported categorized by full-time equivalents, overtime, and non-ceiling personnel. Formats for presenting the data in the reports should be decided after consultation with the General Accounting Office.

Because national performance data compiled quarterly present service level averages and combined totals, service declines in some offices could be hidden by increases in others portraying overall stability. Monitoring service in those offices which experience staff reductions is, therefore, essential. To ensure such monitoring is occurring and to assist the Committee in its oversight, the Committee requests that the Social Security Administration identify and report by December 31, 1988, those field offices where FTE staffing has declined by 20 percent or more as of September 30, 1988, when compared to staffing at September 30, 1987. For offices where such staffing declines occurred, the Social Security Administration should provide comparative workload pending data for claims, redeterminations, and overpayments for September 30, 1988, and September 30, 1987. Where pending workloads as of September 30, 1988, have increased in offices which experienced reductions, reasons for the increase and plans for any further staffing changes should be provided.

In August 1987, the Social Security Administration solicited the views of its supervisors on current issues facing the agency. At hearings before the Committee, it was disclosed that many of the supervisors expressed serious concerns about the effects of the staff reductions on employee morale and service. Also, many allegations were made that processing time and workload statistics can be and are influenced by practices that improve the results but not service. The Commissioner told the Committee that she planned to address these concerns after meeting with supervisors throughout the country. The Committee requests the Commissioner to periodically advise the Committee on what actions are taken and planned to address the concerns and correct the problems identified.

One specific area of concern which the Social Security Administration has continued to ignore is its flawed sample of how long clients wait in field offices before being served. The General Accounting Office has pointed out that the current sampling approach and technique does not include all time clients spent waiting and the Social Security Administration's supervisors and employees frequently follow different practices during the sample period to improve wait time statistics. The Committee expects the Social Security Administration to develop an alternative strategy for collecting accurate wait time data in individual offices and to report the results to the Committee.

A General Accounting Office report in September 1987 disclosed a significant backlog of employer wage reports which had to be reconciled with the Internal Revenue Service's records to ensure individuals receive proper credit for their earnings. The General Accounting Office estimated that the records of 9 million people could be involved. Failure to assign staff to reconcile these cases in the past has contributed to the backlog. The Committee expects the Commissioner to monitor progress in resolving earnings discrepancies, ensure sufficient staff are assigned to the task, and to periodically advise the Committee of the status and progress made.

Computer Systems

In 1982 the Social Security Administration reported that its computer systems were close to collapse, difficult to maintain and deficient in both hardware and software. At that time, the administration proposed a 5-year systems modernization plan to improve its data processing operations. This plan called for upgrading obsolete computer hardware, redesigning undocumented and error-prone software, and improving upon inefficient data management techniques. Since that time GAO has issued reports on implementation progress and problems. For example, GAO has reported that the Social Security Administration had not completed standards for software development and that software improvement had not taken place as scheduled because of planning and management problems; proceeded with large-scale hardware procurements without proper testing and justification; and the major software redesign effort, the claims modernization project, has encountered significant delays.

In April 1987 the General Accounting Office found that while the Social Security Administration has made progress and realized operational improvements by acquiring new and larger capacity computer equipment it has not met the objectives of modernizing its software and implementing an integrated data base architecture. Further, GAO reported that limited progress in these areas had occurred because the Social Security Administration did not: (1) follow the 1982 modernization plan's technical strategy, (2) relate to an agencywide, long-range plan, and (3) adequately integrate and manage the effort. Among other things GAO recommended that the Social Security Administration, while completing its long-range operational plan, redirect its modernization effort by defining and prioritizing system deficiencies, and reducing the scope of future modernization efforts to address the most critical system deficiencies. Because of these reported problems this Committee placed a moratorium on future modernization expenditures until the reassessment was complete, and a new comprehensive detailed plan for computer modernization and automatic data processing [ADP] expenditures was prepared and reviewed by GAO.

In response to the GAO reports and the Committee's action, the Commissioner formally acknowledged to the Congress, in June 1987, that the modernization effort needed to be redirected, that the agency was revising its modernization plan to be in conformance with the agency's long-range goals, and that a baseline analysis was being performed to identify and prioritize its systems deficiencies. In January 1988 the agency issued a long-range strategic plan. This long-range document does not, however, provide a detailed and comprehensive description of immediate, short-term and long-term plans for computer modernization and ADP expenditures. The Committee understands that a revised computer modernization plan to support both the long-range and tactical plans of the agency may be completed about January 1989. This plan is, of course, no help, in evaluating the needs for new computer spending authority in the fiscal year 1989 appropriations bill. In order to help the Committee evaluate such needs for fiscal year 1990 and subsequent years, the Committee requests the Social Security Administration to provide a report by November 15, 1988, that contains a comprehensive, detailed plan of SSA's immediate, short-term and long-term plans for computer modernization and ADP expenditures.

The Commissioner has also stated that the agency has experienced difficulty in the financial management of the modernization effort and intends to institute improvements in this area and eliminate the large recurring balances in unobligated balances by the beginning of fiscal year 1989. The Committee commends the Commissioner for her efforts in this area. In order to avoid any confusion, the Committee wishes to make clear that the goal of eliminating carryover should not be achieved just for its own sake. In particular, if projects originally requested for a particular fiscal year cannot be funded on schedule, the agency should not substitute other lower-priority projects not originally requested for that fiscal year.

In view of the Committee's emphasis on funding originally requested high priority projects, the historical trend of significant availability of carryover funds and the lack of a comprehensive, detailed new computer modernization plan against which to judge fiscal 1989 computer needs, the Committee has recommended a reduction of $45,661,000 from the budget request for data processing and telecommunications.

The Committee understands the Social Security Administration has awarded a contract to install a nationwide toll free 800 telephone number so that all calls from the public will be directed to telephone answering centers. The Committee is concerned that the Commissioner's planned implementation of the nationwide 800 phone number beginning October 1, 1988, may have been initiated without appropriate consideration of cost-effective alternatives and without fully considering the potential impact on staffing and service. Prior to any implementation of the 800 number, the Commissioner should report on the costs and benefits of both the 800 number approach chosen and that of other alternatives to the national 800 number which were considered but rejected, including assurances that no office closings of any type would result.

The Committee expects that there will be no unusual number of office closings during fiscal year 1989, but nevertheless is concerned that the cumulative effect of unchecked staffing reductions proposed by the administration may eventually lead to unwise consolidations and closures.

The Committee is aware of the acute need for the development of a facilities' consolidation plan for the Social Security Administration and the Health Care Financing Administration at their Woodlawn, MD, campus. While the Committee strongly supports retaining both agencies in the Woodlawn area, it is concerned that the current 14-building arrangement is both inefficient for agency management purposes and does not offer the kind of quality workspace necessary for these two agencies to function properly. As a result, the Committee directs the Social Security Administration, Health Care Financing Administration, and the General Services Administration to develop a plan for the consolidation and construction of new agency facilities in the Woodlawn, MD, area, to be submitted to the Committee by March 15, 1989.

The Committee is aware of widespread support by Social Security Administration employees for an onsite day care facility at its Woodlawn, MD, headquarters, despite the resistance of the Social Security Administration's leadership to such an idea. The Committee does not believe that the creation of such a facility would be unfair to other Social Security Administration facilities across the country since nearly 20 percent of the agency's employees work at Woodlawn. As a result, the Committee directs the Social Security Administration to conduct a comprehensive feasibility study for an onsite day care facility at Woodlawn. The report shall be due by February 1, 1989.

Victims of chronic fatigue syndrome often experience symptoms of sufficient severity to legally qualify them for Social Security disability.

However, Social Security Administration guidelines are not sufficiently defined and this situation is producing uneven application of what should be a consistent national policy. The Social Security Administration should consider revising its guidelines for chronic fatigue syndrome in consultation with both the National Institutes of Health and the Centers for Disease Control.

FAMILY SUPPORT ADMINISTRATION

FAMILY SUPPORT PAYMENTS TO STATES

1988 comparable appropriation	$8,644,385,000
1989 appropriation request	8,223,137,000
House allowance	7,855,137,000
Committee recommendation	8,204,337,000

The Committee recommends an appropriation of $8,204,337,000 for family support payments to States, which is in addition to the $2,500,000,000 appropriated last year as an advance for the first quarter of fiscal year 1989. This is $18,800,000 less than the administration request and $349,200,000 more than the House allowance. The recommendation is $440,048,000 less than the fiscal year 1988 comparable appropriation of $8,644,385,000.

These funds provide grants to States for the Federal share of activities related to public assistance to the needy as well as for child support enforcement activities. The largest single program is aid to families with dependent children [AFDC] which provides benefits to needy children deprived of parental support by death, disability, or continued absence from the home. Other benefit programs include AFDC benefits for families in which the principal wage earner is unemployed, emergency assistance, assistance to destitute or ill Americans who are being repatriated, and adult assistance in Puerto Rico and the territories. The Child Support Enforcement Program is aimed at assuring that absent parents meet their responsibility to provide support for their children. The grants also include funds to pay the Federal share of the costs State and local governments incur in administering these benefit programs.

The Committee recommendation concurs with the President's estimates for the entitlement programs, except for assumed quality control disallowances and proposed welfare reform initiatives. This includes $8,967,769,000 for aid to families with dependent children, $13,368,000 for payments to territories, $124,000,000 for emergency assistance and repatriation, and $1,186,200,000 for State and local welfare administration. For child support enforcement, $900,000,000 is included for State and local administration, and $270,000,000 is provided for Federal incentive payments; these costs are offset by the Federal share of collections, estimated at $757,000,000.

The Committee has also included $2,700,000,000 as a first-quarter advance for fiscal 1990, compared to the $2,664,000 House allowance.

The Committee notes that both the House and Senate have passed different versions of welfare reform legislation, which, if enacted, would substantially increase costs related to this entitlement program. Although no funds have been specifically included in this account to cover anticipated enactment of such legislation, which cannot be precisely estimated until completion of conference, the Committee expects the Department to use the automatic drawdown authority provided in bill language to begin implementation of welfare reform legislation promptly after it becomes public law.

The Committee urges the Secretary to work with States which have authorized by State statute State expenditures for demonstration projects to provide services to families at risk of long-term AFDC dependency, and to consider Federal matching reimbursement under the AFDC program services match.

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

1988 comparable appropriation	$1,531,840,000
1989 appropriation request	1,187,000,000
House allowance	1,567,000,000
Committee recommendation	1,187,000,000

The Committee recommends an appropriation of $1,187,000,000 for the Low-Income Home Energy Assistance Program [LIHEAP]. This is the same as the administration request, $344,840,000 less than the fiscal year 1988 appropriation, and $380,000,000 less than the House allowance.

This program provides grants to States to help low-income individuals pay the high cost of energy, particularly heating costs in winter. There is a wide variation among the States in the ways assistance is provided, including direct payments to individuals and vendors and direct provision of fuel.

The Committee notes that even though substantial amounts of unspent oil overcharge funds are available to the States to offset the impact of Federal cutbacks, the General Accounting Office indicates the States have not, on the average, been using a large percentage for LIHEAP. Due to the extremely tight Federal allocation ceiling, the States may need to consider designating more funds for LIHEAP from other sources than they have in the past, as well as to further reduce the amount of Federal funds transferred to other block grants. The administration has testified that the States have $1,300,000,000 in remaining unspent overcharge distributions, and more than half the States continue to annually transfer appropriations from LIHEAP to other block grants. An estimated additional $246,000,000 may be distributed to the States in fiscal 1989 from Department of Energy oil overcharge funds.

REFUGEE AND ENTRANT ASSISTANCE

1988 comparable appropriation	$346,933,000
1989 appropriation request	278,883,000
House allowance	Defer
Committee recommendation	400,000,000

The Committee recommends $400,000,000 for refugee and entrant assistance, compared to $346,933,000 provided in fiscal year 1988, an increase of $53,067,000. This is $121,117,000 more than the budget request. The House deferred action, pending enactment of renewed authorizing legislation.

The refugee assistance program is designed to assimilate refugees into American society as quickly and effectively as possible while minimizing the burden to States and localities. The program reimburses States for the costs of providing direct cash and medical assistance to needy refugees as well as social services such as English language training and vocational training.

The Committee allowance is sufficient to provide 31 months of cash and medical assistance, instead of 24 months as proposed in the President's budget request. It also recognizes that the State Department refugee ceiling of 68,500 is 17,500 higher than the level financed by the budget request, and anticipates the impact of additional arrivals from Eastern Europe late in fiscal 1988.

The $283,000,000 recommended for cash and medical assistance includes an estimated $42,000,000 for State administration, consolidating these funds in one line-item, as was the practice in previous years. The remaining amounts, $67,000,000 for social services, $8,000,000 for voluntary agencies, $6,000,000 for preventive health, and $36,000,000 for targeted assistance, restore funding essentially to current services levels.

Within the amount for targeted assistance, the Committee expects that special assistance to Dade County schools and Jackson Memorial Hospital be maintained at no less than the fiscal 1988 operating level of approximately $10,500,000. It is the intent of the Committee that targeted assistance funds should be awarded to assure that current level of services—based on monthly expenditure rates—is continued in all communities through calendar year 1989 only.

The Committee is sensitive to the fact that the renegotiation of the Mariel Agreement between the United States and the Government of Cuba has resulted in the gradual release of 3,000 Cuban political prisoners. The Committee acknowledges that most, if not all, of these prisoners and their families, are seeking entry into the United States as refugees. These refugees should be given full support under the Refugee Assistance Act and the funds provided by this Committee to assist them in their transition to independent living in the United States with assistance such as health and social services, education, and job placement. The Committee urges the Office of Refugee Resettlement in consultation with the State Department to assist those communities and voluntary agencies in those regions most significantly impacted by the entry of the Cuban political prisoners and their families, in order to provide a humane and effective transition into the United States.

WORK INCENTIVES

1988 comparable appropriation	$92,551,000
1989 appropriation request	
House allowance	Defer
Committee recommendation	92,551,000

For the Work Incentive Program, the Committee recommends $92,551,000. This amount will provide a full year transitional appropriation in anticipation of enactment of welfare reform legislation. The House deferred action, pending enactment of revised authorizing legislation and the administration proposed termination of the program. Federal administrative expenses are included as part of the "Program administration" account.

The Work Incentive Program provides job training and support services, including child care, designed to help welfare recipients obtain permanent employment and become economically self-sufficient.

COMMUNITY SERVICES BLOCK GRANT

1988 comparable appropriation	$382,290,000
1989 appropriation request	310,000,000
House allowance	354,398,000
Committee recommendation	385,864,000

The Committee recommends an appropriation of $385,864,000 for the community services block grant compared to the House allowance of $354,398,000. This is $75,864,000 more than the administration request and $3,574,000 more than the fiscal year 1988 appropriation of $382,290,000.

The community services block grant authorizes formula grants to States for activities of local community action agencies and other eligible entities to provide a variety of services that assist in assisting individuals out of poverty and toward becoming economically self-sufficient. In addition, the Committee also recognizes that the number of community action agencies, the total counties served, as well as the number of individuals receiving assistance from community action agencies, have all increased in the past 4 years. To carry out these activities, State grants of $344,664,000 are recommended compared to the $315,000,000 House allowance.

Several discretionary programs are also administered through the Office of Community Services, for which the following funding levels are recommended in bill language: community economic development, $21,000,000; national youth sports, $6,500,000; rural housing and community facilities, $4,200,000; and assistance for migrants and seasonal farmworkers, $3,000,000.

Community economic development [CED] funds are used by community-based private, nonprofit corporations to stimulate job creation and business opportunities in poor communities. The CED program uses community organizations to carry out effective local economic development efforts.

Due to increased demand for economic development funding as reflected in the number of grant applications, the Committee recommends an increase over 1988 funding of $2,091,000. In light of the success of this program, the continuing need in both urban and rural communities for community economic development projects and the continuing high demand for such funds, the Committee is recommending an increase for this program.

The rural housing and community facilities program has two components. One is to make grants to public and private nonprofit organizations in rural America. The other component is assistance to poor rural communities on their water and sewer needs. This program is primarily carried out through six regional organizations called rural community assistance programs [RCAPS]. This is the only program of its kind in the Federal Government. Such assistance is in more demand than ever. The Safe Drinking Water Act requires communities to meet certain standards for drinking water.

For community food and nutrition activities, $2,500,000 is recommended, the same as the House allowance. This program provides funding to community-based local and statewide nonprofit agencies to help relieve hunger and poverty through assisting low-income communities to identify potential sponsors of child nutrition programs and to initiate new programs in underserved or unserved areas. Grantees also coordinate food assistance resources and help develop approaches to meet the nutritional needs of low-income people.

The Community Food and Nutrition Program [CFNP] is a separately authorized program within the Community Services Block Grant Act [CSBG]. Sixty percent of CFNP-appropriated funds are required to be distributed to eligible agencies for statewide programs whose purpose is to alleviate hunger through implementing programs and activities authorized by the act. CSBG provides the mechanism for distribution of 60-percent funds, but CFNP funds are not intended as additional CSBG dollars to be equally divided up among current CSBG grantees within a State nor a substitution for previously granted CSBG funds to a statewide program.

The Department of Health and Human Services is again directed to inform States that potential statewide grantees must: Demonstrate that proposed activities are statewide in scope; conduct activities which represent a comprehensive and coordinated effort to alleviate hunger within their State; involve a broad range of organizations within the State also committed to alleviating hunger; and preferably have a demonstrated track record successfully implementing programs designed to alleviate hunger.

The Department of Health and Human Services is expected to offer such training and technical assistance as is needed by CFNP grantees across the country. The Committee further expects the Department to file an annual report on who received CFNP funds (both 60-percent and 40-percent funds), what activities these groups engaged in, and what these groups accomplished in light of the allowable activities. CFNP program funds should not be used in compiling the annual report.

The Committee understands that the Department of Health and Human Services did not accept new applications in fiscal 1988 for the Community Food and Nutrition Program's discretionary grants. Instead, the Office of Community Services reevaluated the applications that were submitted, but not funded, in fiscal 1987 and will make awards in fiscal 1988 based on those applications. The Committee notes that this was a departure from the annual competition of grants programs held in previous years and notes further that it was not apprised by the Department of this change in procedure. The Committee expects that in fiscal 1989 the Department will make awards in the usual fashion.

For community partnership activities, the Committee recommends $4,000,000, compared to $3,000,000 House allowance. This program, for which $2,900,000 was appropriated in 1988, funds new and innovative programs to alleviate poverty. Funds must be matched on a 50–50 basis by block grant recipients with individual grant not to exceed $250,000. The Committee views favorably the preliminary results from the first round of funding completed in 1987.

The Department of Health and Human Services is directed to ensure that grant awards of community partnership activities be made through a competitive award process.

The Committee again urges the authorizing committees to consider modifying the formula to address this inequity, while holding harmless the other States and activities of the community services block grant.

PROGRAM ADMINISTRATION

1988 comparable appropriation	$79,464,000
1989 appropriation request	79,533,000
House allowance	79,533,000
Committee recommendation	82,464,000

The Committee recommends an appropriation of $82,464,000 for program administration, which is $2,931,000 more than the administration request and House allowance, and $3,000,000 more than the fiscal 1988 appropriation.

The funds in this account pay for the Federal costs of administration for a variety of programs, including work incentives, aid to families with dependent children, child support enforcement, energy assistance, refugee and entrant assistance, and community services block grant activities.

The amount recommended is intended to maintain existing staff levels, including restoration of Labor Department positions necessary to continue the Work Incentive Program, which the administration had proposed be eliminated. The Committee directs that at least $3,400,000, which includes the amount necessary to continue the direct payment of penalty mail which State employment security agencies are authorized to use, will be expeditiously transferred to the Department of Labor.

ASSISTANT SECRETARY FOR HUMAN DEVELOPMENT SERVICES

SOCIAL SERVICES BLOCK GRANT

1988 comparable appropriation	$2,700,000,000
1989 appropriation request	2,700,000,000
House allowance	2,700,000,000
Committee recommendation	2,700,000,000

The Committee recommends an appropriation of $2,700,000,000 for the social services block grant. This is the same as the administration request and the House allowance. The recommendation is also the same as the fiscal year 1988 appropriation. The $2,700,000,000 appropriation is the full amount currently authorized by law.

These funds are granted to States and territories to enable them to provide services to low-income persons, including recipients of AFDC, SSI, and Medicaid program funds. Services include programs to: prevent, reduce, or eliminate dependency on Federal assistance; assist low-income persons to achieve or maintain self-sufficiency by providing supportive services such as day care; prevent neglect, abuse, or exploitation of children and adults; prevent or reduce inappropriate institutional care; and secure admission or referral to institutional care when other forms of care are not appropriate.

HUMAN DEVELOPMENT SERVICES

1988 comparable appropriation	$2,455,532,000
1989 appropriation request	2,456,868,000
House allowance	2,531,808,000
Committee recommendation	2,573,465,000

The Committee recommends an appropriation of $2,573,465,000 for human development services. This is $116,597,000 more than the administration request and $41,657,000 more than the House allowance. The recommendation is $117,933,000 more than the fiscal year 1988 appropriation of $2,455,532,000. The House allowance excludes budget requests of $30,876,000 for programs lacking renewed authorizing legislation.

The Human Development Services appropriation consists of programs for children and youth, the elderly, the developmentally disabled, and native Americans, as well as Federal administrative costs.

The Committee has not agreed with the budget proposal to replace eight research, training, and demonstration line-items with a consolidated request.

Head Start

Head Start is a program designed to reach the most vulnerable children and families. This program is intended primarily for preschoolers from low-income families, and seeks to help these children function effectively in their present environment and to be able to assume responsibilities in school and community activities. Programs emphasize cognitive and language development, physical and mental health, and parent involvement to encourage each child to determine at his or her highest level of potential. At least 10 percent of the children served are handicapped.

The Committee recommends $1,250,000,000 for the Head Start Program, an increase of $43,676,000 over fiscal year 1988. This amount is sufficient to offset the impact of inflation, maintaining the high quality of these preschool services which make an important contribution to efforts combatting such problems as the high dropout rate.

The Committee also included $1,500,000 for child development associate scholarships, an increase of $64,000 over the budget request and fiscal 1988 enacted appropriations.

Child development program

The Committee has included $20,000,000 for start-up costs of the comprehensive Child Development Program authorized by Public Law 100–297. There was no budget request for this program, and the House has also provided $20,000,000 to initiate it.

Under this program the Secretary is authorized to make operating grants to eligible agencies in rural and urban areas to pay the Federal share of the cost of projects designed to encourage intensive and comprehensive supportive services which will enhance the physical, social, emotional, and intellectual development of low-income children from birth to compulsory school age, including providing necessary support to their parents and other family members.

Child abuse and neglect/family violence

This program improves and increases activities at all levels of government which identify, prevent, and treat child abuse and neglect through State grants, technical assistance, research, demonstration, and service improvement.

The Committee has included $30,898,000 for child abuse prevention and treatment. This total restores fiscal 1988 cutbacks to fiscal 1987 enacted amounts, including $12,000,000 for State grants, $13,898,000 for child abuse discretionary activities, and $5,000,000 for challenge grants.

The Committee recognizes that renewed authorizing legislation, the Child Abuse Prevention, Adoption and Family Services Act of 1988, require several new studies of the relationship between child abuse and various contributing factors. The Committee urges the Department to consider submitting a supplemental budget request to finance these new studies, so that existing activities will not be adversely affected. The Committee intends that a majority of the discretionary research and demonstration grants from the National Center on Child Abuse and Neglect go to support prevention activities as directed by the new authorizing legislation.

For programs authorized by the Family Violence Prevention and Treatment Act, the Committee recommends $8,500,000, an increase of $362,000 over the budget request and fiscal 1988 enacted level.

The Committee recommends $5,000,000 for temporary child care for handicapped children and crisis nurseries, an increase of $213,000 over the initial funding provided in fiscal 1988 to implement this program. Funds provide in-home or out-of-home nonmedical child care for handicapped children and children with chronic or terminal illness, and programs to provide crisis nurseries for abused or neglected children. The House deferred consideration due to lack of renewed authorizing legislation. The administration proposed no funding for this program, but requested $4,787,000, the amount of the 1988 appropriation, be added to child welfare research and demonstration for similar activities in a consolidated research, training, and demonstration account.

Runaway and homeless youth

This program provides support to State and local governments and nonprofit agencies to help community-based facilities deal with the immediate needs of runaway and homeless youth and their families outside the framework of the law enforcement and juvenile justice systems. Funds are allocated to homeless and runaway youth centers based on the number of youth under age 18 per State, and grants are authorized for a national communications system linking runaways, their families, and service providers.

The Committee has provided $27,250,000 for programs authorized by the Runaway and Homeless Youth Act, an increase of $1,161,000 over both the budget request and fiscal 1988 enacted levels. Due to lack of renewed authorizing legislation, the House deferred consideration of runaway youth services.

Dependent care planning and development

The Dependent Care Program provides grants to States for activities related to dependent care resource and referral systems and school-age child care services. These funds are to be used to assist in the planning, development, establishment, and expansion or improvement of child care services, but are not to be used for operating costs associated with specific referral or child care services.

The Committee recommends $8,750,000 for dependent care programs, $373,000 over the fiscal 1988 level and fiscal 1989 budget request.

Child welfare assistance

The Committee recommends an appropriation of $250,000,000 for child welfare assistance, an increase of $10,650,000 over both the fiscal 1988 enacted level and fiscal 1989 budget request.

The primary purposes of the Child Welfare Assistance Program are to prevent the child's removal from the home and to keep the family together. Where removal from the home is necessary, the program provides services to reunite the child with his or her family as quickly as possible. Where this is not appropriate, the program provides services aimed at recruiting and placing the child in an appropriate permanent setting, such as an adoptive home.

Child welfare training

The Committee recommendation of $3,823,000 for child welfare training restores funding to the fiscal 1987 level, is $163,000 above the fiscal 1988 enacted appropriation and House allowance. The administration proposed consolidation into a human services research, training, and demonstration account.

Adoption opportunities

The Committee recommends $5,000,000 for adoption opportunities, restoring funding to the fiscal 1987 level. This is an increase of $213,000 over both the fiscal 1988 enacted level and the fiscal 1989 budget request.

This activity funds a national adoption data-gathering and analysis system, including a national information exchange, and implements adoption training and technical assistance programs. The administration proposed consolidation into a human services research, training, and demonstration account.

The Committee has not considered funding for two new demonstration programs which were authorized under the Adoption Opportunities Program as a result of the Child Abuse Prevention, Adoption, and Family Services Act of 1988 (Public Law 100–294). The Committee recognizes the importance of these two programs, postlegal adoption services and minority children placements, and encourages the administration to consider submitting budget requests on a timely basis.

Child welfare research

The Committee recommends an appropriation of $11,340,000 for child welfare research, restoring funding to the fiscal 1987 level. This is an increase of $483,000 over the fiscal 1988 enacted level and the fiscal 1989 budget request.

This program provides financial support to public or other nonprofit institutions for special research and demonstration projects in the field of child welfare and child development which are of national significance. Its ultimate goal is to strengthen and support the family as the primary institution for meeting the developmental needs of children and youth. Projects concentrate on serving children in foster care in need of adoption or day care, as well as delinquent youth. The administration proposed consolidation into a human services research, training, and demonstration account.

Aging

The Committee recommends an appropriation of $757,700,000 for programs funded through the Administration on Aging. This figure is an increase of $32,278,000 over the fiscal 1988 appropriation and $56,213,000 over the budget request.

Supportive services and centers.—Funds under this program are currently awarded by formula grant to each State with an approved State plan on aging to pay up to 85 percent of the cost of operating and establishing social services, including multipurpose senior centers. State agencies on aging make awards to area agencies on aging on the basis of State-approved area plans and intrastate funding formulas.

The Committee has included $280,000,000 for supportive services and centers, $11,928,000 above the fiscal 1988 appropriation, as well as the $268,072,000 budget request.

Ombudsman activities

The Committee recommendation includes $1,000,000 for ombudsman activities, an increase of $43,000 over the budget request and House allowance. The Committee recognizes that appropriations for long-term care ombudsman activities do not meet the so-called funding trigger required in the Older Americans Act amendments of 1987. However, the Committee urges the Administration on Aging to encourage the States to allocate their proportionate share of this amount for the ombudsman programs, through the supportive services and centers activity.

Congregate and home-delivered meals.—The congregate and home-delivered meals programs provides funds for operating and establishing nutrition services projects, which provide meals to older persons. Each meal served must: meet one-third of the minimum daily dietary requirements; consider health, religious, or ethnic dietary needs of participants; and be served in food containers and with utensils usable by blind and handicapped individuals where feasible and appropriate. Home-delivered and congregate meals are to be available at least once a day, 5 days a week.

The Committee recommends a total of $439,000,000 for nutrition services, including $360,000,000 for congregate meals and $79,000,000 for home-delivered meals. The congregate meals recommendation is $15,336,000 over the fiscal 1988 level and the home-delivered meals recommendation is $3,365,000 over fiscal 1988 enacted appropriations. The budget requests for nutrition services and home-delivered meals are $344,664,000 and $75,635,000, respectively, the fiscal 1988 enacted levels.

Grants to Indian tribes.—This program currently provides grants to eligible Indian tribal organizations to promote delivery of the following services to older Indians not served by other programs: meals at least once a day, 5 days a week, according to the specifications of the Nutritional Services Program; and legal, information, and referral services. Funds are also available to older Indians for temporary shelter, fuel, road clearing, water services, health and screening services, and an ombudsman program.

The Committee recommends restoring funding to the fiscal 1987 level for grants to Indian tribes, $7,500,000. This is an increase of $319,000 over the budget request and fiscal 1988 enacted level of $7,181,000.

Frail elderly

The Committee has included $5,000,000 for frail elderly in-home services, an increase of $213,000 over the budget request and House allowance. In-home services include: homemaker and home health aides; visiting and telephone reassurance; chore maintenance; in-home respite care for families; and minor home modifications.

Research, training, and special projects.—These funds are currently used to provide adequately trained personnel in the field of aging, improve knowledge on the problems and needs of older Americans, and demonstrate new methods of improving the quality of life of older persons.

The Committee recommendation of $25,000,000 represents an increase of $1,065,000 over the budget request, as well as the fiscal 1988 enacted level, for research, training, and demonstration activities in the field of aging.

The Committee directs the Administration on Aging to increase funding above current levels for the following activities: career preparation training; research; and national minority aging organizations with a proven track record in providing special representation and outreach services to the minority elderly.

The Committee also calls upon the Administration on Aging to promote career preparation training of minorities in the field of aging: (1) particularly in policy, managerial, administrative, and supervisory positions; and (2) especially in health, long-term care, and legal services settings.

The Committee further directs the Administration on Aging to provide grants for at least five university-based, long-term care gerontology centers to conduct research, training, and demonstrations on appropriate institutional and noninstitutional long-term care services and to provide technical assistance to State and area agencies on aging and others in the field of aging.

The Committee directs the Administration on Aging to fund national legal services support and demonstration projects at $1,000,000 (on an annual basis), at a minimum, for fiscal year 1989. National legal services support and demonstrate projects mean those which: (1) are conducted by national nonprofit legal assistance organizations which provide support and demonstrations on a national basis to local legal assistance providers; and (2) provide national legal assistance support and demonstrations to local legal assistance providers or State and area agencies on aging for the purpose of providing, including case consultations; training; provision of substantive legal advice and assistance; and assistance in the design, implementation, and administration of free legal assistance delivery systems.

The Committee commends the Administration on Aging for consulting with national aging organizations to develop a sound, relevant, and substantive program announcement for fiscal year 1989. The Committee strongly believes that this dialogue can help to improve the administration of title IV and to make research, training, and demonstration activities even more beneficial for older Americans.

The Committee was pleased that the Office of Human Development Services made American Samoans one of its priorities during last year's discretionary funding cycle. The Committee urges the Office of Human Development Services to continue to keep the problems of American Samoans an identifiable priority during this fiscal year's funding cycle.

The Committee continues to be supportive of prevention activities and has included sufficient funds in this year's bill for these projects to continue. The Committee further again urges the Commissioner on Aging to ensure that the unique expertise of Schools of Public Health is utilized, wherever possible.

Federal Council on Aging

The Federal Council on Aging was established by Congress in 1973 to advise both the legislative and executive branches on matters related to the special needs of older Americans.

The $200,000 Committee recommendation is an increase of $9,000 over both the budget request and fiscal 1988 enacted appropriation, restoring funding to the fiscal 1987 level.

Developmental disabilities

Developmental disability is defined as a severe, chronic disability which: Is attributable to a mental or physical impairment or combination of mental and physical impairments; is manifested before the age of 22; and is likely to continue indefinitely. Major components of this program are: State grants; protection and advocacy services; projects of national significance; and a training effort, funded through university affiliated programs, for personnel needed to render special services.

The Committee recommends $97,000,000 for the Administration on Developmental Disabilities, an increase of $4,133,000 over the fiscal 1988 enacted level and $19,451,000 over the budget request. This recommendation is $13,317,000 above comparable appropriations for fiscal year 1987.

For State grants, the Committee recommends $61,000,000, an increase of $2,599,000 over the budget request and fiscal 1988 enacted level of $58,401,000. These funds will be used to provide payments to States to assist in the development of a comprehensive system and coordinated array of services and other support to people with developmental disabilities in order to increase their independence, productivity, and integration into the workplace and the community.

For protection and advocacy grants, the $20,000,000 Committee recommendation is $852,000 over both the budget request and fiscal 1988 appropriation. These grant funds are provided to States which have a system in place to protect the rights of persons with developmental disabilities and are awarded on the basis of a formula that considers population, the extent of the need for services by persons with developmental disabilities, and the financial need of the State.

For developmental disabilities special projects, the Committee recommends $3,000,000, compared to $2,872,000 appropriated for fiscal year 1988. The budget request proposed consolidation of this line item into a new human services research, training, and demonstration activity.

For university affiliated programs, the Committee recommends $13,000,000, compared to $12,446,000 appropriated in fiscal year 1988. The administration proposed consolidation into a new human services research, training, and demonstration activity.

The University Affiliated Program currently provides operational and administrative support for a national network of 35 university affiliated facilities and 6 satellite centers. Grants are made annually to university affiliated programs and satellite centers based upon performance involving interdisciplinary training, the demonstration of exemplary services and technical assistance, and the dissemination of information to increase the independence, productivity, and community integration of persons with developmental disabilities.

Grants are made to assist university affiliated programs and satellite centers in administering and operating facilities for the provision of diagnostic, evaluative, and treatment services to individuals with developmental disabilities, and for interdisciplinary training programs for personnel needed to provide specialized and generic services to these individuals.

Native American programs

The Native American Program includes financial assistance grants, training and technical assistance, research, demonstration and evaluation and a demonstration revolving loan fund for Native Hawaiians. Assistance is provided through direct grants, contracts, and interagency agreements. These funds will support projects that are expected to result in sustained improvement in the social and economic conditions of native Americans within their communities, and at the same time, to increase the effectiveness of Indian tribes and native American organizations to achieve their own economic and social goals.

The Committee recommends the appropriation of $31,000,000 for the Administration for Native Americans, an increase of $1,321,000 over the budget request and fiscal 1988 enacted level of $29,679,000. The Committee has included $1,000,000, the same as last year's amount, to continue the revolving loan fund for Native Hawaiians, pursuant to the provisions of the Native American Programs Act.

The Committee believes that it would be particularly useful to have an Office for Native American Programs within the Administration on Aging. This office should greatly improve the administration of title VI grant programs and help make the needs of elderly native Americans much more visible.

Program direction

This appropriation provides for the Federal staff that administer programs for children, youth, the aged, the developmentally disabled, and native Americans. Activities include policy guidance, development of program standards, and technical assistance to grantees.

The Committee recommends $65,704,000 for human development services program direction, the same as the administration's budget request and $1,136,000 over the fiscal 1988 appropriation. The Committee recommendation is $180,000 more than the House recommendation.

In view of recent amendments to both the Developmental Disabilities Act and the Older Americans Act that place greater emphasis on planning, training, and service provision to elderly persons with developmental disabilities, the Committee urges the two appropriate administrative agencies to explore jointly funded projects in areas where they have similar legislative mandates and target populations. Such coordination is necessary because of the rapidly increasing number of older Americans with life-long disabilities. Current national estimates establish that by the year 2000 4 out of every 1,000 persons above the age of 55 will face a handicapping condition.

FAMILY SOCIAL SERVICES

1988 comparable appropriation	$811,178,000
1989 appropriation request	1,074,907,000
House allowance	1,074,907,000
Committee recommendation	1,119,907,000

The Committee recommends an appropriation of $1,119,907,000 for family social services. This is $45,000,000 more than the administration request and House allowance, and $308,729,000 more than the fiscal year 1988 appropriation of $811,178,000.

Two entitlement programs—foster care and adoption assistance—now comprise family social services. The Foster Care Program provides funds to States to assist with costs of foster care maintenance for eligible children, administrative costs associated with management of the program, and staff training. The Adoption Assistance Program provides funds to States to assist in paying maintenance costs for children who are adopted under certain conditions. The objective is to provide permanent homes for children for whom adoptive homes are hard to find due to age, minority status, or the presence of handicapping conditions.

The same State agency which administers the Child Welfare Services State Grant Program must administer or supervise the administration of both programs.

Most of the increase over fiscal 1988, $263,729,000, is requested by the administration, and consists of $108,930,000 for prior year claims and $173,863,000 for foster care current law estimates, based on revised economic assumptions, higher number of children in foster care, maintenance payments, administrative costs, and transfers to child welfare services. The Committee has also included $45,000,000, not requested by the administration and deferred by the House to continue the Independent Living Program at its fiscal 1988 funding level. The Independent Living Program provides specialized services to assist older foster care children make the transition, by age 18, to living on their own as independent adults.

DEPARTMENTAL MANAGEMENT

GENERAL DEPARTMENTAL MANAGEMENT

1988 comparable appropriation	$67,840,000
1989 appropriation request	68,160,000
House allowance	68,160,000
Committee recommendation	64,860,000

The Committee recommends an appropriation of $64,860,000 for general departmental management. This is $3,300,000 less than the administration request and the House allowance. The Committee recommendation is $2,980,000 less than the fiscal year 1988 level.

The Committee also recommends the transfer of $7,000,000 from the Social Security and Medicare trust funds. This is equal to the administration's request and is $618,000 more than the fiscal year 1988 amount.

The general departmental management appropriation supports those activities that are associated with the Secretary's roles as policy officer and general departmental manager, including the areas of public affairs, executive secretariat, legislative services, planning and evaluation, procurement assistance, facilities management, legal services, and policy planning and functional guidance for all departmental operations.

Nonresident refugees

The Committee finds that there is a need for both a national policy and a national program which provides for the reimbursement of U.S. medical institutions and physicians which have proffered medical care for seriously ill, nonresident refugees. Since these refugees are ineligible for Medicaid, and without alternative means of support, the hospitals and physicians attending to their care have been forced to absorb enormous financial costs. Therefore, the Committee directs that the Secretary of Health and Human Services, and the Secretary of State, examine the national policy on reimbursement for these services and prepare a joint report to be provided to the Committee by December 31, 1988. The report should include the pending requests to the administration for urgent refugee medical care in the United States, the status of those refugees admitted into the United States for urgent medical care during fiscal 1988, the estimated cost of providing such medical services, the alternatives available for reimbursement, the role of State and local governments, PVO's, and national refugee assistance organizations, and the policy and plan of the administration for payment of medical care provided by U.S. medical institutions and physicians to seriously ill nonresident refugees.

Nurses

The Committee remains concerned that the Department continue to make a special effort to ensure that professional nurses are appointed to various policy boards and committees. The current nursing crisis has major ramifications for all aspects of our Nation's health programs and the Committee feels that nursing expertise must be actively involved in policy recommendations.

OFFICE OF THE INSPECTOR GENERAL

1988 comparable appropriation	$35,769,000
1989 appropriation request	46,430,000
House allowance	46,430,000
Committee recommendation	46,430,000

The Committee recommends new budget authority of $46,430,000 for the Office of the Inspector General [OIG], plus a $40,000,000 transfer from the social security trust funds for total obligational authority of $86,430,000. The Committee recommendation is the same as the administration's request and the House amount and $10,661,000 more fiscal year 1988 appropriation.

The Office of the Inspector General is comprised of three components: the Office of Audit, the Office of Investigations, and the Office of Analysis and Inspections. Each component focuses on three primary areas of the Department—the Health Care Financing Administration [HCFA], the Social Security Administration [SSA], and grants and internal systems. Activities cover all six operating divisions of the Department, including HCFA, SSA, the Family Support Administration [FSA], the Public Health Service [PHS], Human Development Services [HDS], and Office of the Secretary. Through a program of audits, investigations, inspections, and program evaluations, the Office of the Inspector General reduces the incidence of fraud, waste, abuse, and mismanagement, and promotes economy, efficiency, and effectiveness throughout the Department.

The Committee recognizes the steadily increasing responsibilities placed on the Office of Inspector General through new legislation and expansion of departmental programs and activities. Reconciliation legislation in 1985, 1986, and 1987 and the Medicare and Medicaid Patient and Program Protection Act of 1987 have added over 40 new legislative provisions for OIG to enforce. Those provisions are designed to protect HHS program beneficiaries, including the aged and the infirmed, from substandard care. They are also designed to protect the integrity of HHS programs against fraud, misuse, and misrepresentation. To guarantee this important protection, it is essential that the Inspector General's Office be sufficiently staffed with auditors, investigators, and inspectors to discharge its statutory responsibilities.

The Committee recommendation will support 1,302 full-time equivalent [FTE] positions, the same as the administration's request, and an increase of 66 positions over last year's level.

OFFICE FOR CIVIL RIGHTS

1988 comparable appropriation	$16,343,000
1989 appropriation request	16,173,000
House allowance	16,173,000
Committee recommendation	16,173,000

The Committee recommends $16,173,000 in Federal funds for the Office for Civil Rights [OCR], which is a decrease of $170,000 from the fiscal year 1988 amount, and the same as the House allowance and the administration's request. Also included is authority to spend $4,000,000 from the social security trust funds, the same as the fiscal year 1988 amount.

OCR is responsible for enforcing civil rights-related statutes in health care and human services programs. To enforce these antidiscrimination statutes, the Office investigates complaints of discrimination, conducts comprehensive reviews of programs to correct discriminatory practices, conducts outreach initiatives, and provides technical assistance to encourage voluntary compliance among health and human services providers and constituency groups.

The Committee recommendation will support 325 full-time equivalent [FTE] positions, a decrease of 25 FTE's from the fiscal year 1987 level.

POLICY RESEARCH

1988 comparable appropriation	$4,873,000
1989 appropriation request	5,019,000
House allowance	8,373,000
Committee recommendation	7,519,000

The Committee recommends an appropriation of $7,519,000 for policy research. This is $2,500,000 more than the administration request,

$854,000 less than the House allowance, and $2,646,000 more than the fiscal year 1988 appropriation.

This program is authorized by section 1110 of the Social Security Act. It constitutes one of the Department's principal sources of policy-relevant data and research on income sources of the low-income population; on the impact, effectiveness, and distribution of benefits under existing or proposed programs; and, on specific issues that impact upon programs affecting more than one agency within the Department. It is used to analyze issues that cannot be covered in other departmental research programs or under existing evaluation activity. Funding is provided to continue the ongoing, highest priority research and further development of simulation models used for analysis of policy alternatives. Research will continue in the priority areas of welfare policy, retirement policy, the health insurance experiment, health incentives, aging, disability, long-term care, and human services policy.

The Committee recommendation includes $2,500,000 to continue Federal support for the work of the Institute for Research on Poverty. The Committee notes that the Institute has been receiving Federal funding since 1966. The funding provided is intended to allow the Institute to continue to produce policy-relevant research for an additional 2 years.

GENERAL PROVISIONS

Public Health Service full-time equivalents

The Committee once again notes that as the AIDS budget has increased, the Public Health Service [PHS] has had to divert personnel from other areas of responsibility to effectively manage its AIDS efforts. Since 1983, FTE for non-AIDS have decreased by almost 5,000, while AIDS FTE have increased by approximately 1,000. Though the Committee has continuously expressed concern about constrained FTE levels through language contained in the reports accompanying the appropriations bills, the administration has steadfastly neglected the Committee's direction. For example, the fiscal year 1989 President's budget provides an increase of 96 FTE's for AIDS activities while reducing non-AIDS activities by 432 FTE's. If approved NIH would be required to reduce non-AIDS activities by 169 FTE's to support priority AIDS efforts. Therefore, the Committee has again included bill language stating that no personnel ceilings may be imposed, or any other action may be taken which would have the effect of restricting PHS programs from carrying out the activities funded by Congress in the Department of Health and Human Services appropriation acts. This restriction would apply to the Health Resources and Services Administration; the Centers for Disease Control; the National Institutes of Health; the Alcohol, Drug Abuse, and Mental Health Administration; and the Office of the Assistant Secretary for Health.

Every major organizational review including those recently by the Institute of Medicine and the President's Commission on AIDS has concluded that a lack of FTE's has been a major obstacle in the PHS battle against AIDS. The administration has simply failed to recognize the importance of FTE's to the PHS agencies fight against AIDS. The Committee cannot responsibly allow a situation to exist wherein appropriated funds for high priority clinical trials are deferred and delayed due to FTE ceiling constraints. The Committee intends that the PHS programs have the flexibility to use funds appropriated to hire Federal employees to ensure that high priority initiatives for which additional funds and FTE increases are identified in committee reports can be accomplished. These high priority initiatives include AIDS, biomedical research, Alzheimer's disease, sexually transmitted diseases, substance abuse, mental health, and other activities. The removal of FTE limitation constraints will enable the PHS agencies to hire staff when necessary to act more swiftly and effectively to carry out their responsibilities including appropriate responses to Committee directives.

The Committee will carefully review the FTE requirements and utilization of the PHS activities. The Committee expects the PHS agencies and programs to continue to manage their FTE's wisely and does not anticipate that the inclusion of this language will result in large increases in the number of FTE's for the non-AIDS activities. Specifically, the Committee's action is not intended to restrict PHS agencies and programs from contracting out certain activities and services when the PHS agencies and programs determine that such action is advantageous to the Federal Government. To provide guidance in this area, the Committee has included a table to serve as a guide (not a ceiling) on the level of FTE's provided by the Committee to carry out the fiscal year 1989 Committee appropriation allowances. However, the Committee fully expects that specific Committee approval will be sought before any of these agency FTE guidelines are exceeded by more than 5 percent. The table follows:

PUBLIC HEALTH SERVICE

FTE History

	1983 actual	1987 actual [1]	1988 request [1]	1989 President's budget [2]	Senate allowance
Health Resources and Services Administration:					
Non-AIDS	4,737	2,161	2,099	1,921	2,075
AIDS		7	25	25	25
Subtotal, Health Resources and Services Administration	4,737	2,168	2,124	1,946	2,100
Centers for Disease Control:					
Non-AIDS	3,951	4,149	3,989	3,973	4,189
AIDS	45	271	416	432	523
Subtotal, Centers for Disease Control	3,996	4,420	4,405	4,405	4,712
National Institutes of Health:					
Non-AIDS	13,355	12,322	12,491	12,322	12,622
AIDS	59	399	510	580	830
Subtotal, National Institutes of Health	13,414	12,721	13,001	12,902	13,452
Alcohol, Drug Abuse, and Mental Health Administration:					
Non-AIDS	1,659	1,561	1,618	1,603	1,664
AIDS		20	47	57	80
Subtotal, Alcohol, Drug Abuse, and Mental Health Administration	1,659	1,581	1,665	1,660	1,744
Occupational Safety and Health Administration:					
Non-AIDS	1,600	911	872	818	852
AIDS		7	20	20	25
Subtotal, Occupational Safety and Health Administration	1,600	918	892	838	877
Total, Labor, HHS:					
Non-AIDS	25,302	21,104	21,069	20,637	21,402
AIDS	104	704	1,018	1,114	1,483
Total	25,406	21,808	22,087	21,751	22,885

[1] Comparable to fiscal year 1989 request.

[2] Includes reimbursements.

TITLE III—DEPARTMENT OF EDUCATION

COMPENSATORY EDUCATION FOR THE DISADVANTAGED

1988 comparable appropriation	$4,336,543,000
1989 appropriation request	4,566,084,000
House allowance	4,672,619,000
Committee recommendation	4,598,576,000

The Committee recommends an appropriation of $4,598,576,000 for compensatory education for the disadvantaged. This is $32,492,000 more than the administration's request and $262,033,000 more than the fiscal year 1988 comparable appropriation. The House allowed $4,672,619,000.

Programs financed under this account are authorized under the Elementary and Secondary Education Act, as recently amended by the Hawkins-Stafford Elementary and Secondary School Improvement Amendments of 1988 (Public Law 100–297), and section 418A of the Higher Education Act of 1965, as amended. Chapter 1 programs provide financial assistance to State and local educational agencies to meet the special educational needs of educationally disadvantaged children, migrant children, handicapped children in State-operated programs, neglected and delinquent children in State institutions and juveniles in adult correctional institutions. Funds for each of these programs are allocated on a formula based on the number of eligible children and each State's average per pupil expenditure. The chapter 1 appropriation also supports State administration, evaluation and technical assistance activities, and as recently amended, State program improvement grants.

The High School Equivalency Program [HEP] and College Assistance Migrant Program [CAMP] provide grants to institutions of higher education to assist migrant and seasonal farmworkers past the age of compulsory school attendance to complete the courses necessary to receive a high school diploma or its equivalent, and to assist migrant students enrolled in their first undergraduate year at a college or university.

With the exception of chapter 1 evaluation and technical assistance, the rural education opportunities program, and the HEP and CAMP programs, all programs in this account are forward funded. Funds appropriated for fiscal year 1989 will become available for obligation on July 1, 1989, and remain available through September 30, 1990. Funds would generally support projects in the 1989–90 school year.

GRANTS TO LOCAL EDUCATIONAL AGENCIES

For this program, the Committee recommends an appropriation of $4,075,000,000 which is $245,400,000 more than the comparable fiscal year 1988 level and $16,635,000 more than the budget request. The House allowed $4,100,000,000.

Grants made under this activity provide financial assistance to local school districts to support supplementary compensatory education services designed to increase the educational attainment of educationally disadvantaged children to a level appropriate for children of their age. At the funding level provided, the Committee estimates that approximately 5.07 million children will be served with an average Federal contribution of $804 per child.

Approximately 90 percent of the Nation's school districts participate in the chapter 1 program. Financial assistance flows to school districts by formula, based on a State's average per pupil expenditure for education and the number of school age children from low-income families. The Hawkins-Stafford amendments maintain chapter 1's policy of serving educationally deprived children most in need. The new law also provides for a significant improvement in the targeting of resources by reserving the first $400,000,000 appropriated for grants to LEA's in excess of $3,900,000,000 for concentration grants to counties with high concentrations of low-income children. Following with the provisions of the act, $175,000,000 shall be distributed as concentration grants under the amount provided.

The Committee has included language to modify the minimum State allotment under concentration grants so that it conforms to the minimum allotment as passed by both the House and the Senate. This change is made for the purpose of distributing fiscal year 1989 funds only.

The Hawkins-Stafford amendments also permit districts to use up to 5 percent of their chapter 1 funds for innovative projects; require districts to evaluate program effectiveness in improving student academic performance; and strengthen requirements for parental involvement.

STATE AGENCY PROGRAMS

For the three State agency programs, the Committee recommends a total appropriation of $457,000,000, $4,150,000 more than the fiscal year 1988 comparable appropriation, and $4,086,000 more than the administration request and the House allowance.

For the State agency migrant program, the Committee provides $275,000,000, which is $5,971,000 more than the comparable 1988 level, the administration's request, and the House allowance. The chapter 1 migrant program authorizes grants to State education agencies for programs to meet the special educational needs of the children of migrant agricultural workers and fishermen. Funds are allocated through a statutory formula based on the number of full-time equivalent migrant students residing in each State and the State's per pupil expenditures. The Hawkins-Stafford amendments increased the age range of students to be counted in the allocation formula from 5 through 17, as previously authorized, to 3 through 21 years of age. This increased the target population—the number of full-time-equivalent students counted for allocation purposes—from approximately 437,000 to 491,000 students.

Eligible student population counts for this program are determined by the migrant student record transfer system [MSRTS], which also provides centralized storage of migrant students' school and health records. At the recommended level, an estimated 403,000 full-time equivalent students will be served with an average Federal contribution of $682 per child. Funds provided for this program also support the administrative costs of MSRTS as well as inter- and intra-state coordination activities.

For the State agency Handicapped Program, the Committee provides $150,000,000 which is a decrease of $1,269,000 below the comparable 1988 level, the administration request, and the House allowance. The program provides formula grants to States to support special educational services for handicapped children in State-operated or State-supported programs. Funds may be passed through to local educational agencies for the purpose of providing services to students who have been transferred from State to local schools. Funds are allocated based on each State's per-pupil expenditure and the number of handicapped children who are either in State-operated or supported programs or in local district programs. The program would serve an estimated 261,500 children at this level with an average Federal contribution per child of $578. The Hawkins-Stafford amendments amend this program's operations to conform more closely to those of the State grant program authorized by the Education of the Handicapped Act.

The Committee recommends $32,000,000 for the Neglected and Delinquent Program. This amount is $552,000 less than the fiscal year 1988 comparable level and $616,000 less than the administration request and the House allowance. This program provides financial assistance to State educational agencies for special educational services to neglected and delinquent children in State-run institutions and juveniles in adult correctional institutions. At the Committee's recommended level, the program would serve about 52,780 students in State-supported institutions for neglected and delinquent children or in adult correctional institutions at a Federal contribution of approximately $618 per child.

The Hawkins-Stafford amendments authorize States to set aside up to 10 percent of the funds they receive to help students in institutions make the transition into locally operated schools. Designed to address the frequent failure of institutionalized students to adjust to local school environments and their high dropout rate, these activities would support alternative schools or classes, counseling and supervisory services, and State-supported group homes.

STATE ADMINISTRATION

The Committee provides $41,000,000 for State administration, $2,704,000 more than the comparable 1988 level and $1,050,000 less than the administration request and the House allowance. These funds enable State educational agencies to meet their administrative responsibilities under the chapter 1 local educational agency program and the State agency programs. The Hawkins-Stafford amendments established new minimum funding levels for State administration. No State shall receive less than $325,000 (compared to $225,000 as previously authorized), or $50,000 in the case of the outlying areas.

STATE PROGRAM IMPROVEMENT GRANTS

For newly authorized State program improvement grants, the Committee recommends $4,800,000, $45,000 more than the administration's budget request of $4,755,000. The House provided $5,755,000.

Funds for this activity will support the efforts of State educational agencies in helping local school districts improve the quality of chapter 1 projects that have been ineffective in improving academic performance. Under the Hawkins-Stafford amendments, State educational agencies are required to assist school districts that have been unsuccessful over a period of time in improving the performance of students served by chapter 1 programs. In such instances, States will develop joint improvement plans with local educational agencies. Funds provided for program improvement grants will be used for direct educational services to implement program improvement plans.

EVALUATION AND TECHNICAL ASSISTANCE

The Committee recommends $8,000,000 for evaluation and technical assistance activities. This amount is $819,000 more than the fiscal year 1988 comparable appropriation and the same as the administration's request and the House allowance.

As reauthorized by the Hawkins-Stafford amendments, activities which may be supported include Federal evaluations, technical assistance, research, and data analysis. In addition to ongoing evaluations, data analysis, and technical assistance activities, this funding will support commencement of the newly mandated 10-year longitudinal study of chapter 1 students.

RURAL EDUCATIONAL OPPORTUNITIES

The Committee recommends $4,000,000 for the rural educational opportunities program. The administration's budget included no request for this program and the House did not provide funding. Under this program, a minimum of 10 regional rural assistance centers will be established to improve educational services for chapter 1 children in attendance at small or rural schools. The centers would be similar to the existing chapter 1 technical assistance centers, but will focus on rural areas.

HIGH SCHOOL EQUIVALENCY PROGRAM AND COLLEGE ASSISTANCE MIGRANT PROGRAM [HEP/CAMP]

For the High School Equivalency Program, the Committee provides $7,276,000. The Committee also provides $1,500,000 for the College Assistance Migrant Program. The budget request did not include funds for these programs. The House provided $7,500,000 for the High School Equivalency Program and $1,400,000 for the College Assistance Migrant Program.

The High School Equivalency Program [HEP] provides 3-year grants to provide the outreach, teaching, counseling, and placement services necessary to recruit and serve eligible migrant dropouts. The College Assistance Migrant Program [CAMP] helps migrant and seasonal farmworkers enrolled as first-year undergraduates to make the transition from secondary to postsecondary education. Participants receive tuition scholarships as well as tutoring and counseling services.

Funds provided for the High School Equivalency Program shall be used to pay for the final year of 2- and 3-year grant awards begun in fiscal year 1987 and fiscal year 1988. For the CAMP Program, the Committee expects that funds provided above the fiscal year 1988 level shall be used to boost funding to those grantees whose annual award stands considerably below their initial funding request for the current grant cycle.

IMPACT AID

1988 comparable appropriation	$708,476,000
1989 appropriation request	592,000,000
House allowance	740,000,000
Committee recommendation	739,036,000

The Committee recommends an appropriation of $739,036,000 for impact aid, which is $147,036,000 more than the administration's request. The recommendation is $30,560,000 more than the fiscal year 1988 appropriation. The House provided $740,000,000.

Impact aid helps to compensate school districts for the cost of educating children when enrollments and the availability of revenues from local sources have been adversely affected by the presence of Federal activities. Included in this program are: payments for "A" children; payments for "B" children; payments for Federal property (section 2); disaster assistance; and construction. The Augustus F. Hawkins-Robert T. Stafford Elementary and Secondary School Improvement Amendments of 1988 amended and reauthorized the Impact Aid Program.

CATEGORY "A" PAYMENTS

Category "A" children are those who reside and whose parents work on Federal property or are on active duty in the uniformed services. Also in category "A" are children residing on Indian lands or in federally subsidized low-rent housing.

The Committee provides $565,000,000 for payments made on behalf of "A" children. This amount is $28,856,000 more than the fiscal year 1988 comparable appropriation and $18,000,000 more than the administration's request. The House provided $553,000,000.

Payments made for "A" children in heavily impacted, "super A" districts, those districts in which "A" children represent 20 percent or more of the total average daily attendance, will be at approximately 100 percent of entitlement. For districts in which "A" children represent at least 15 percent but less than 20 percent of the total average daily attendance, payments will be made at approximately 75 percent of entitlement. Remaining section 3(a) funds will be prorated to school districts where "A" children represent less than 15 percent of the total average attendance. This payment scheme is similar to that employed in fiscal year 1988. Final payment levels will be subject to the new multitiered payment formula contained in the Hawkins-Stafford amendments. These amendments also stipulate that payments made on behalf of "A" children residing in federally subsidized low-rent housing will be made at the same rate as other "A" children.

SECTION 3(d)(2)(B) PAYMENTS

Section 3(d)(2)(B) payments compensate several of the Nation's most heavily impacted school districts for revenues foregone as a result of Federal activity. Increased rates of payment are authorized to the extent necessary to enable the district to provide educational services at a level equivalent to that provided by comparable districts in the State. Approximately $20,000,000 of the amounts provided for section 3 payments will be distributed under section 3(d)(2)(B) as called for in the Hawkins-Stafford amendments. These amendments further provide that a district will have met the 3(d)(2)(B) tax effort requirement if its tax rate is equal to at least 80 percent of its comparable districts' rates; however, if a district's tax rate is more than 80 percent but less than 100 percent of the average rate of its comparable districts, its 3(d)(2)(B) payment will be reduced accordingly. The amendments also stipulate that only that portion of a district's carryover balances that exceed 30 percent of their operating costs (or the amount allowed by State law) are to be treated as available funds for 3(d)(2)(B) purposes.

The Committee is concerned over reports that school districts are experiencing problems with the Office of Impact Aid about paperwork requirements imposed under Indian policies and procedures [IPP]. In some cases, impact aid payments have been withheld or delayed. The Committee recognizes that impact aid funds, while in some instances the result of the presence of Indian children, are not directed to serve only Indian children. The Committee urges the Office of Impact Aid to correct these problems and to reduce and simplify the IPP paperwork process.

CATEGORY "B" PAYMENTS

Category "B" children are those who reside or whose parents work on Federal property or are on active duty in the uniformed services.

A total of $134,036,000 is provided for category "B" payments, the same as the fiscal year 1988 comparable appropriation. The administration requested no funding for "B" payments. The House provided $137,000,000.

Payments for "B" children will be made at approximately 35 percent of entitlement to districts in which "B" children represent 20 percent or more of the total average daily attendance. Payments to districts in which "B" children represent less than 20 percent of total average daily attendance will be prorated to the level allowed by remaining funds. This payment scheme is similar to that employed in fiscal year 1988. As in the case of payments for "A" children, the Hawkins-Stafford amendments dictate that final payment levels will be subject to the new payment formula contained in those amendments.

SECTION 2—PAYMENTS FOR FEDERAL PROPERTY

The Committee provides $15,000,000 for section 2 payments, $318,000 less than the fiscal year 1988 comparable appropriation, the same as the House allowance and $5,000,000 more than the administration request.

Section 2 payments are made to local school districts that have a partial loss of tax base (10 percent or more of assessed value) as a result of the Federal Government's acquisition of property. Payments are not tied to the presence of federally connected children in the district. The Committee recommendation is estimated to be sufficient to continue to provide 100 percent of entitlement for section 2 payments. The Hawkins-Stafford amendments change the base used to calculate that loss by basing section 2 payments on the district's current levied real property tax rate for current expenditures. Under regulations recently published by the Department, only a portion of a district's tax rate would have been used to compute section 2 payments.

The Committee instructs the Secretary to comply fully with language included in Public Law 100–202 concerning incorrect payments under section 2(a)(1)(C) of Public Law 81–874. The Committee expects this provision to apply to any section 2 overpayments to the Craig County School system of Virginia which were due to incorrect determinations of the system's section 2 entitlements.

DISASTER ASSISTANCE

The Committee has not provided funding for disaster assistance for fiscal year 1989. Although the administration requested $10,000,000 for this activity, the rate at which funds have been drawn down from this account during fiscal year 1988 indicates that funds carried over from previous years may be sufficient to meet new 1989 applications and projects continuing from prior years. The House provided the administration request in full.

The disaster assistance program provides funds to local educational agencies affected by Presidentially declared disasters to enable them to make repairs, provide temporary facilities, replace instructional materials and equipment, and pay increased operating expenses.

CONSTRUCTION

The Committee has included $25,000,000 for construction, which is $2,022,000 more than the fiscal year 1988 comparable appropriation and the same as the administration request and the House allowance.

Construction activities provide grants to school districts or support direct Federal activities to repair and construct urgently needed minimum school facilities in school districts where the enrollment and the availability of local revenues have been adversely affected by Federal activities. Funds provided by the Committee for 1989 will support awards under sections 5, 10, and 14 of Public Law 81–815. Section 5 supports awards to districts experiencing an increase in Federal activity; section 10 supports awards to districts where State or local funds are prohibited from being expended on federally connected children; and section 14 grants go to districts comprised mainly of Indian lands or which provide educational services to children residing on Indian lands, and to districts comprised mainly of Federal lands with inadequately housed pupils. Approximately 92 continuations and 22 new awards will be supported with the funds provided.

SCHOOL IMPROVEMENT PROGRAMS

1988 comparable appropriation	$1,030,738,000
1989 appropriation request	1,126,835,000
House allowance	1,118,538,000
Committee recommendation	1,104,180,000

The Committee recommends an appropriation of $1,104,180,000 for school improvement programs. This amount is $22,655,000 less than the administration's request and $73,442,000 more than the fiscal year 1988 comparable appropriation. The House provided $1,118,538,000.

The "School improvement programs" account includes the chapter 2 State Block Grant Program to assist States and localities in supporting educational improvement and an array of programs addressing national concerns or special educational needs. It also includes funding for various mandatory set-asides within the chapter 2 national programs and a variety of other categorical programs of national interest.

STATE BLOCK GRANTS

The Committee recommends $473,700,000 for the State Block Grant Program. This amount is $5,000,000 less than the fiscal year 1988 comparable appropriation and $66,800,000 below the administration request. The House provided $489,500,000.

The State Block Grant Program provides grants to State educational agencies [SEA's] to improve elementary and secondary education for students in public and private schools. Of the funds provided to the SEA's, 80 percent of each State's total allocation must be passed through to local educational agencies. While the Committee recognizes that State educational agencies may retain up to 20 percent of the funds provided to States, the Committee expects that at least $383,000,000 of the amount provided will be passed through to local educational agencies. Under the Hawkins-Stafford amendments, funds may be used for the acquisition of educational materials including classroom and library books; the training and professional development of teachers, counselors, administrators, and school board members; the financing of programs to meet the educational needs of students at risk of failure and/or students for whom providing an education entails higher than average costs, and financing innovative programs designed to carry out schoolwide improvements and/or enhance the educational program and climate of the school. Local educational agencies have complete discretion in distributing funds among the variety of permissible activities.

NATIONAL PROGRAMS

The Committee has provided a total of $28,300,000 for chapter 2 national programs. This is $2,869,000 more than the fiscal year 1988 comparable appropriation and $1,300,000 more than the administration's request. National program funds provide for the continued activities of the national diffusion network, inexpensive book distribution, national school volunteer programs, arts in education, and law-related education programs. The Committee has also provided funds for a new Blue Ribbon Schools Program authorized in the Hawkins-Stafford amendments.

For the national diffusion network [NDN], the Committee provides $11,200,000, the same as the administration request and the House allowance. NDN facilitates school improvement by identifying and disseminating information about programs that work, bringing alternatives to the attention of educators throughout the Nation who are interested in improving their education programs, and providing training and followup technical assistance for those who decide to adopt a particular program. For programs seeking inclusion in the NDN, the Hawkins-Stafford amendments allow for the review by a program effectiveness panel. This review will focus solely on the efficacy and transferability of the program.

For the Inexpensive Book Distribution Program, the Committee provides $8,500,000, the same as the House allowance and $300,000 more than the administration request. This level is $841,000 more than the fiscal year 1988 comparable level. This program distributes books to children from low-income families to help motivate them to read. This program has not only been successful in motivating children to read, but has increased the use of libraries, increased parental involvement in schools, and contributed to improved reading achievement.

For the Arts in Education Program, the Committee provides $3,500,000, the same as the administration request and the House allowance. This will support two awards of national significance. An award of $2,522,000 will go to the Very Special Arts Organization, which supports the development of quality programs to integrate the arts into the general education of disabled students and the lives of disabled adults. This grant also supports the Very Special Arts Festival Program in every State, as well as research projects, curriculum development, and teacher training. The amount provided by the Committee represents an increase of $133,000 over the fiscal year 1988 comparable appropriation.

An award of $978,000 will be made to the John F. Kennedy Center for the Performing Arts to support the Alliance for Arts Education whose focus is on the advancement, quality, and integration of the arts into basic education programs. This grant also provides partial support for three programs—Programs for Children and Youth, the American College Theatre Festival, and the National Symphony Orchestra Education Program—that provide opportunities for children and youth to participate in the arts as performers or as audiences at live performances. This level represents an increase of $52,000 above the fiscal year 1988 comparable level.

The Law-Related Education Program promotes efforts to educate individuals about law, the legal process, the legal system, and the principles and values on which these are based. For this purpose, $3,200,000 is provided, the same as the administration request and $630,000 less than the fiscal year 1988 comparable appropriation.

For the National School Volunteer Program, the Committee provides $1,000,000. From this amount the Secretary shall utilize not less than $390,000 to establish a national center for leadership in school volunteer and partnership programs. This will be accomplished through a grant, or contract, with an entity: (1) whose membership is composed of educators, business people, volunteers, students, senior citizens, and others interested in improving elementary and secondary education; (2) which operates nationwide; and (3) which is experienced in and has as its primary purpose assisting schools in organizing, promoting, and utilizing volunteers in schools. The center shall: (1) provide training in school volunteer program development, (2) conduct an annual survey of volunteer programs, (3) evaluate volunteer programs, and (4) perform any of its functions under this section through contracts with State and local educational agencies, institutions of higher education, business concerns, public agencies, and nonprofit organizations. The remaining funds provided for fiscal year 1989 shall be used to provide between one and three awards to expand the number and strengthen the quality of organized school volunteer activities by awarding grants on a competitive basis to: partnerships between elementary and secondary schools, State educational agencies, local educational agencies, or any combination of the above, and one or more of the following: a Government agency, a nonprofit organization, an institution of higher education, or a business concern. Grants shall be made to establish or expand exemplary projects at the State and local level or strengthen the capability of State educational agencies and nonprofit organizations to provide leadership and assistance to local educational agencies and nonprofit private schools in the planning, operation, and improvement of school volunteer programs. In awarding these grants, the Secretary shall give priority to programs that are intergenerational in nature, and that target services on at-risk students, drug and alcohol abuse prevention, and/or the transfer of high technology skills.

For blue ribbon schools, the Committee provides $900,000, the same as the administration request and the House allowance. This newly authorized program provides the Secretary with the authority to conduct competitions to select schools and school programs in recognition of their high quality. Schools or programs are to be selected solely on merit. The Secretary's elementary and secondary school recognition programs, which are comparable to programs under this authority, were previously conducted under the authority of the chapter 2 Secretary's discretionary fund.

FUND FOR INNOVATION IN EDUCATION

For the newly authorized fund for innovation in education, the Committee provides $4,520,000. These funds are made available in the form of a transfer of funds of unobligated balances initially appropriated for the Excellence in Education Program which are available until expended. The administration requested $4,691,000 in new budget authority for this activity in addition to this reappropriation. The House provided $8,570,000 in new budget authority in addition to the transfer of funds.

This program provides funding for programs and projects that show the promise of identifying and disseminating innovative educational approaches. Funds also may be used to support a program of optional tests for academic excellence, programs for technology education, programs to strengthen and expand computer education resources, and activities to establish and strengthen comprehensive school health education programs. Funds are provided through grants to or contracts with State educational agencies, local educational agencies, institutions of higher education, or other private or public organizations. The Committee expects that between $2,000,000 and $3,000,000 of the funds provided will support the continuation of studies on early intervention programs begun in fiscal year 1988 at the direction of the Congress.

Within the amount transferred, the bill stipulates that not less than $1,000,000 shall be made available for the technology education activities authorized under section 4603 of the Hawkins-Stafford Act. These funds will be used to develop materials for educational television and radio programming for use in elementary and secondary education. The Committee continues to be supportive of the Secretary's contributions through his discretionary fund to the Children's Television Workshop for the development of the science education series, "3–2–1 Contact," and the math series, "Square One TV." The Committee expects the Secretary to continue these efforts through appropriations provided to the fund for innovation in education and/or the discretionary funds made available through the science and math education program.

In addition, a total of $5,000,000 of new budget authority is provided under the bill for programs to strengthen and expand computer education resources. The Hawkins-Stafford amendments included this provision after a hearing in which students from Newark, NJ, and Hartford, CT, demonstrated the benefits they had gained through the use of computers in their classrooms. The Committee urges the Secretary to give special consideration to computer education grant applications from school districts like Newark and Hartford with large numbers of disadvantaged students. The Committee believes that such districts stand to gain the most from expanded computer education resources, including hardware, software, and teacher training.

DRUG-FREE SCHOOLS AND COMMUNITIES

The Committee provides $250,000,000 for programs authorized under the Drug-Free Schools and Communities Act. This amount is the same as the administration request and the House allowance, and $20,224,000 more than the fiscal year 1988 comparable appropriation. Of the funds appropriated for drug-free schools and communities, 1 percent is allocated to the territories, 81.8 percent is distributed through the State Grant Program, and the remaining 17.2 percent is made available for national programs.

STATE GRANTS

The Drug-Free Schools and Communities State Grants Program distributes funds to the States on the basis of population aged 5 to 17. State and local education agencies receive 70 percent of each State's grant. The State education agency [SEA] may retain up to 10 percent for statewide programs and administrative costs; the remaining 90 percent is passed through to local education agencies [LEA's] for local drug abuse prevention programs.

The other 30 percent of each State grant is received by the Governor's office. At least 50 percent of the Governor's set-aside is reserved for awards to local governments and nonprofit entities for innovative, community-based programs for high-risk youth.

The Hawkins-Stafford amendments strengthen accountability in this program by requiring each LEA to prepare a progress report documenting the extent to which it has achieved its objectives during the first 2 years of the program. Based on a review of this report, SEA's are required to provide technical assistance to any LEA not making reasonable progress toward the accomplishment of its objectives.

NATIONAL PROGRAMS

Drug-Free Schools and Communities National Programs distribute funds through discretionary grants and contracts. These funds are to be used for programs for students in institutions of higher education, training and curriculum development, programs for Indian youth, programs for Hawaiian natives, and Federal activities. Funds also support five regional centers.

The Hawkins-Stafford amendments specifically authorize the Secretary to conduct evaluations of programs under the Drug-Free Schools and Communities Act. The amendments also mandate a study of the relationship between alcohol and drug abuse and youth suicide. A report on the findings of this study must be made to the Congress within 1 year of the effective date of the amendments.

The Committee is concerned with reports by the Department of Health and Human Services [HHS] and the Rand Corp., indicating that, in general, drug education programs in the schools are short in duration and generic in scope. Studies by HHS have pointed out that a single educational unit on drug abuse and a one-size-fits-all approach to drug education curricula is unlikely to succeed in preventing substance abuse among students. Even so, prior to the initial appropriation of funds under the Drug Free Schools Act, approximately 85 percent of the Nation's schools merely incorporated some form of drug education into their regular health education curricula.

The Rand Corp., and HHS have argued that drug education programs that are not tailored to the circumstances of an individual community, age group, or grade level are very unlikely to send an effective message to students. Drug education programs that exist in a vacuum without input from actors external to the classroom, namely parents, community leaders, church leaders, and peers, are also unlikely to be effective. Both HHS and Rand go on to point out that such external actors, beyond being involved in drug education, must also deliver the drug prevention message in a consistent manner. School administrators, teachers, or parents that enforce abstinence from drug abuse, while simultaneously tolerating alcohol abuse, be it in the home or the school, are very unlikely to be successful in preventing either.

The Committee urges the Secretary of Education to continue his efforts in promoting comprehensive communitywide drug education programs and expects that successful examples of such programs will continue to be disseminated through the regional centers. The Committee also looks forward to reviewing the Secretary's upcoming report evaluating the effect of the Drug Free Schools Act in improving school-based drug education.

CHRISTA McAULIFFE FELLOWSHIPS

The Committee recommends $1,915,000 for the Christa McAuliffe Fellowship Program, the same as the House allowance and the administration request. The program, which was formerly the National Talented Teachers Fellowship Program, helps talented public and private school teachers upgrade their teaching skills. One national teacher fellowship is awarded in each congressional district of each State, the District of Columbia, the Commonwealth of Puerto Rico, and in each of the outlying areas. The fellowships provide funds for study or research sabbaticals, development of innovative programs, staff development, model teacher programs, or consultation with other schools or institutions.

MATHEMATICS AND SCIENCE EDUCATION

The Committee provides $139,000,000 for science and mathematics education, $19,325,000 more than the fiscal year 1988 comparable level, the administration request, and the House allowance.

These funds provide financial assistance to State and local education agencies and institutions of higher education to strengthen the economic competitiveness and national security of the United States by improving the skills of teachers and the quality of instruction in mathematics and science.

For State grants, $130,000,000 is provided. The Hawkins-Stafford amendments changed the formula for distribution of funds under the State Grant Program so that 50 percent of the funding is distributed to the States according to the relative number of children aged 5 to 17, and 50 percent is distributed based on each State's share of the previous year's chapter 1 allocation. Each State must spend 75 percent of its grant for elementary and secondary programs and 25 percent for higher education programs. Of the State's funds for elementary and secondary programs, at least 90 percent must be distributed to local education agencies. Additionally, each State must use a minimum of 5 percent of its funds for demonstration and exemplary programs for teacher training, instructional equipment and materials, programs for historically underrepresented and underserved persons, gifted and talented students, and for dissemination. Each State must use a minimum of 95 percent of its higher education funding for competitive grants to postsecondary institutions. Mathematics and science national programs provide funds for a wide variety of programs of national significance in math and science education. Programs are designed to improve instruction, provide teacher training, increase the access of underserved and underrepresented students to such programs, and disseminate information about exemplary programs of math and science instruction. The amendments also eliminated direct contract authority, and authority to set aside funds for research and evaluation.

The Committee provides $9,000,000 for national programs for math and science education. Within this amount, the Committee expects that not less than $5,000,000 shall be awarded to State educational agencies on a competitive basis for the development of not more than 10 secondary schools with programs of national significance in science and mathematics education. These schools should offer an exceptional learning environment in science and mathematics, and should serve as exemplary demonstration programs suitable for dissemination. Awards shall be one-time only and should not exceed $600,000. Not less than 50 percent of the cost of such programs should be matched in cash or in kind by State, local, or private sources, but in no case should in-kind contributions exceed 80 percent of the non-Federal share. Priority should be given to applications from States which currently have no such State-based schools and which have a demonstrated need for a work force trained in advanced technology skills.

TRAINING AND ADVISORY SERVICES

For training and advisory services authorized by title IV of the Civil Rights Act, the Committee has provided $24,000,000. This is $544,000 more than the House allowance, the administration request, and the fiscal year 1988 comparable appropriation. These funds will enable the Department to provide the third year of funding for 10 regional centers to provide technical assistance to address problems associated with desegregation on the basis of race, sex, and national origin. Funds shall also be distributed as grants to civil rights units within State educational agencies to provide assistance to local school districts in meeting desegregation-related needs.

FOLLOW THROUGH

The Committee provides $7,000,000 for Follow Through. This amount is $700,000 less than the House allowance and $133,000 less than the fiscal year 1988 comparable appropriation. The administration did not request funds for Follow Through. This program provides grants to local educational agencies, universities, and research organizations to develop and improve exemplary early education programs for children of low-income families in the early elementary grades. Funds provided for fiscal year 1989 will be used for second year continuation awards based on a new competition held in fiscal year 1988.

TERRITORIAL TEACHER TRAINING

For territorial teacher training, the Committee has provided $2,000,000. This is $45,000 more than the House allowance, the fiscal year 1988 comparable appropriation, and the administration request. Funds are awarded to the departments of education in American Samoa, Guam, the Northern Mariana Islands, the Marshall Islands, the Federated States of Micronesia, the Republic of Palau, and the Virgin Islands to train elementary and secondary school teachers. These training efforts have been extremely important in assisting the outlying areas to upgrade the qualifications of their uncertified instructional staff and to assist others to obtain higher educational degrees.

ASSISTANCE TO THE VIRGIN ISLANDS

The Committee has provided $4,787,000 for general assistance to the Virgin Islands, which is the same as the House allowance. The administration requested no funding for this program. Under this program, funds are provided to the Virgin Islands to improve elementary and secondary education, and have been used primarily to renovate and construct additions to existing school buildings to accommodate an expanding school-age population. Funds may also be used to correct asbestos and other school building deficiencies.

FUND FOR THE IMPROVEMENT AND REFORM OF SCHOOLS AND TEACHING

The Committee has not provided an appropriation for the fund for the improvement and reform of schools and teaching [FIRST]. The administration requested $12,000,000 for this activity which the House provided. Funds for this activity would support two new programs, the Grants for Schools and Teachers Program and the Family-School Partnerships Program.

MAGNET SCHOOLS ASSISTANCE

For magnet schools assistance, the Committee has provided $115,000,000, which is $43,195,000 more than the fiscal year 1988 comparable level and the same as the administration request and the House allowance. This program supports grants to local educational agencies for use in magnet schools that are part of an approved desegregation plan and are designed to attract substantial numbers of students of different social, economic, ethnic, and racial backgrounds. Funds may be used for teacher salaries; purchase of books, materials, and equipment; and planning and promotional activities in order to improve academic instruction and vocational skills. Programs must be geared to the improvement of students' knowledge of mathematics, science, history, English, foreign languages, art, music, or vocational skills. The maximum amount an eligible local education agency may receive is limited to $4,000,000 annually.

All funds provided for fiscal year 1989 will go toward a new competition for 2-year grant awards. In the last competition for funds, the Secretary received more than 125 applications requesting more than $250,000,000 in assistance. Thirty-eight awards were made totaling $75,000,000. Between 55 and 65 new awards shall be made with the funds provided for fiscal year 1989. Under the authorizing statute, previous grantees are not given any priority in competing for funds under a new grant cycle. The Hawkins-Stafford amendments further require that for amounts appropriated in excess of $75,000,000, priority shall be given to previously unfunded applicants.

ALTERNATIVE CURRICULUM SCHOOLS

The Committee has not provided funds for the newly authorized Alternative Curriculum Schools Program. The Hawkins-Stafford Act expressly prohibits appropriations for this program until the funding level for the Magnet Schools Program reaches $165,000,000. Even so, the administration requested $5,000,000 for this program while simultaneously requesting $115,000,000 and proposed bill language that overrides the provision of the authorizing statute.

LEADERSHIP IN EDUCATIONAL ADMINISTRATION

The Committee has included $4,358,000 for the Leadership in Educational Administration [LEAD] Program. LEAD supports one institute per State through which State or local educational agencies, higher education institutions, private nonprofit organizations or consortia of such entities can train school administrators in the management and problem-solving skills they need to meet the challenges of educational reform and improve the quality of education at the school and program level.

Under the provisions of the authorizing statute, funding for the program for the fourth year of operation shall be used to begin single 3-year contract extensions to each State at one-half the annual level for previous years. Because of a delay in the enactment of contract authority for the outlying areas, a small portion of funds provided for fiscal year 1989 shall be used to finance the continuation costs for the third year of the initial grant cycle for these areas.

EDUCATION OF HOMELESS CHILDREN AND YOUTH

The Committee recommends an appropriation of $5,000,000 to carry out activities authorized under section 722 of the Stewart B. McKinney Homeless Assistance Act. The amount provided is $213,000 more than the fiscal year 1988 comparable level and the House allowance. The administration did not request funding for this program. These funds are used by State educational agencies for an Office of the Coordinator of Education of Homeless Children and Youth, to develop and implement State plans for educating homeless children, and to carry out other activities to ensure that all homeless children and youth in the State have access to a free appropriate public education. Additionally, States must collect data on homeless children and submit interim and final reports on these data to the Department of Education. Funds for this program are allocated in proportion to the State's chapter 1 allocation, except that no State receives less than $50,000.

SCHOOL DROPOUT DEMONSTRATION ASSISTANCE

The Committee provides $22,000,000 for school dropout prevention demonstrations. This amount is $1,935,000 less than the 1988 level and $554,000 more than the administration request and the House allowance. Funds will be used to provide second-year payments for 2-year awards begun in fiscal year 1988. No current project or activity will be restricted due to this reduced level of funding since the authorizing statute calls for increased matching contributions by supported projects in their second year of operation.

The program provides funds to local educational agencies [LEA's] to establish and demonstrate effective programs that identify potential dropouts and prevent them from dropping out; identify and encourage dropouts to reenter school and complete their education; provide early intervention activities for at-risk students; and provide model systems for collecting and reporting information about children who drop out. Of the funds appropriated, 25 percent is allocated to LEA's enrolling at least 100,000 students, 40 percent to LEA's with between 20,000 and 100,000 students, 30 percent to LEA's with fewer than 20,000 students, and 5 percent to community-based organizations [CBO's]. Of the funds allocated to each category of LEA, 25 percent must be made available to partnerships of LEA's, private businesses, CBO's, and other public or private nonprofit entities. The Federal share of funds for second-year grants, which will be supported with the 1989 appropriation, may not exceed 75 percent. Priority is given to applications that show both replication of successful dropout activities and very high numbers or percentages of dropouts. Funds also will be used by the Department to identify promising projects and validate their effectiveness as well as to evaluate the overall program and other projects in the area of dropout prevention.

ELLENDER FELLOWSHIPS

For Ellender fellowships, the Committee has provided $3,500,000, $1,106,000 more than the fiscal year 1988 level and $500,000 more than the House allowance. The administration did not request funds for this program. Through this program, funds are awarded to the Close Up Foundation of Washington, DC, to make fellowships available to low-income students and their teachers to enable them to participate in the Close Up Foundation's program. The students spend 1 week in Washington, DC, attending seminars on current events and meeting with representatives from the three branches of Government.

The Hawkins-Stafford amendments to the Elementary and Secondary Education Act authorize a new program to better enable older Americans and recent immigrants to participate in the Ellender Fellowship Program. Within the amount provided, the Committee has earmarked $1,000,000 for this new activity.

WOMEN'S EDUCATIONAL EQUITY

The Committee has provided $2,620,000 for women's educational equity [WEEA]. This amount is $731,000 less than the House allowance and the fiscal year 1988 comparable appropriation. The administration requested no funds for this program. The Women's Educational Equity Act [WEEA] Program provides grants and contracts to public and private nonprofit organizations and individuals to develop educational materials and projects to promote educational equity for women and girls. A national publishing center, under contract to the Department, publishes and markets products developed by the grantees.

STAR SCHOOLS

For the Star Schools Program, the Committee has provided $10,000,000. This is $9,148,000 less than the fiscal year 1988 comparable appropriation and the House allowance. The administration did not request funds for this activity.

This program is designed to improve instruction in math, science, foreign languages, and other subjects such as vocational education, primarily by means of satellite or microwave relay between centrally located instructors and students at schools in different locations, especially schools eligible for chapter 1 services or those in areas with scarce resources and limited access to such courses. The program supports eligible telecommunications partnerships organized on a statewide or national basis to develop, construct, and acquire telecommunications equipment; to develop and acquire instructional programming; and to obtain technical assistance in such areas. At least 50 percent of the funds must be for services in chapter 1 eligible schools, and at least 25 percent of the funds must be for instructional programming. Generally, grantees must provide a 25-percent match in funds.

EDUCATION FOR NATIVE HAWAIIANS

For programs for the education of native Hawaiians, the Committee provides $6,000,000. The administration did not request funding for the five activities for native Hawaiians authorized under the Hawkins-Stafford Act. These activities include a model curriculum implementation project, family-based education centers, a higher education demonstration program, a gifted and talented demonstration program and a demonstration program to provide special education services to native Hawaiian children.

For the model curriculum implementation project, the Committee provides $500,000. Funds will be used to implement the Kamehameha Elementary Education Program [KEEP], a model curriculum developed by the Kamehameha Elementary Demonstration School. Direct grants will be made to the University of Hawaii for teacher training; to the Hawaii Department of Education for educational support services; and to the Kamehameha Schools/Bernice Pauahi Bishop Estate for continued research, development, and assessment activities.

For the native Hawaiian family-based education centers, the Committee provides $2,000,000. Funds will be used for direct grants to native Hawaiian organizations to develop and operate at least 11 family-based education centers throughout the Hawaiian Islands. These centers will include parent-infant and preschool programs, as well as research, development and assessment activities.

For the Native Hawaiian Higher Education Demonstration Program, the Committee provides $1,500,000. This newly authorized program provides funds for direct grants to the Kamehameha Schools/Bernice Pauahi Bishop Estate for demonstration programs to provide higher education fellowship assistance to native Hawaiian students. Activities supported by this program may include undergraduate and graduate fellowships, guidance and counseling services, and research and evaluation activities.

For the Native Hawaiian Gifted and Talented Demonstration Program, the Committee has provided $1,000,000. Funds will be allotted as a grant or contract with the University of Hawaii at Hilo for the establishment of a Native Hawaiian Gifted and Talented Center. The university may also use these funds for demonstration projects for gifted and talented elementary and secondary school students.

For the Native Hawaiian Special Education Program, the Committee provides $1,000,000. Funds will be used for discretionary grants to the State of Hawaii and to native Hawaiian organizations to address the special education needs of native Hawaiian students. Projects may include the identification of children in need of special education services, the conduct of educational services, and research and evaluation activities.

BILINGUAL, IMMIGRANT, AND REFUGEE EDUCATION

1988 comparable appropriation	$191,751,000
1989 appropriation request	200,504,000
House allowance	201,782,000
Committee recommendation	197,009,000

The Committee recommends an appropriation of $197,009,000 for bilingual, immigrant, and refugee education. The recommendation is $3,495,000 less than the administration's request and $5,258,000 more than the fiscal year 1988 comparable appropriation. The House provided $201,782,000.

Federal bilingual education programs are designed to meet the educational needs of students of limited English proficiency to enable them to achieve full competence in English and to meet promotion and graduation requirements.

Bilingual education programs

The Committee provides $112,106,000 for this program, the same as the House allowance and the administration request and $10,908,000 more than the fiscal year 1988 comparable appropriation.

Discretionary grants are made primarily to local school districts to help them build their capacity to provide appropriate educational services to limited English proficient students. Projects for academic excellence are also funded to disseminate information on exemplary programs serving these students. The Hawkins-Stafford amendments provide additional flexibility to local school districts to select the instructional method most appropriate under local circumstances by increasing the percentage of funds that may be used for special alternative instructional projects. The amount that may be used for such projects—which do not necessarily use the native language—has increased to a maximum of 25 percent of this appropriation.

Support services

The Committee recommends $10,903,000 for support services, $975,000 more than the fiscal year 1988 comparable appropriation and the same as the administration request and the House allowance.

Activities include grants to State education agencies for data collection and improvement of educational services within the State; contracts for evaluation assistance centers to provide technical assistance to local school districts in evaluating local projects and in identifying the educational needs and competencies of limited English proficient students; and contracts for research and evaluation studies and a national clearinghouse to collect, analyze, and disseminate information about programs for limited English proficient students. The Hawkins-Stafford amendments increased the minimum grant award that a State education agency receives from $50,000 to $75,000.

Training and technical assistance

The Committee recommends $28,000,000 for training and technical assistance, $5,564,000 less than the administration's request and the House allowance and $7,447,000 less than the fiscal year 1988 appropriation.

Training and technical assistance activities are designed to improve training programs for educational personnel and strengthen the skills of personnel in programs for limited English proficient students. Activities include grants to institutions of higher education, State and local educational agencies, and private, nonprofit organizations to train teachers, other educational personnel, and parents. Contracts are awarded for multifunctional resource centers to provide training and technical assistance to educational personnel and parents participating in instructional programs for limited English proficient students.

The Committee has included bill language stipulating that none of the funds provided for training and technical assistance shall be used to restart the bilingual fellowships program. No funds were used for this program in fiscal year 1988. The Committee is concerned with the low rate of completion on the part of program participants from previous years as well as the low percentage of program graduates that are working in fields that are consistent with the stated goals of the program. Under the provisions of the program, participants are expected to work in the field of bilingual education, ideally at the postsecondary level, for as many years as they receive fellowships for graduate study. Participants who do not fulfill their work requirement are required to reimburse the Federal Government for their fellowships. While it is recognized that a certain percentage of participants have not fulfilled their work requirement, the Secretary has failed to develop a mechanism for the reimbursement of awards or commenced operation of an automated system for tracking program compliance. Given these concerns, the Committee has deferred from restarting this activity until the study called for in the Hawkins-Stafford amendments on the need and effectiveness of the program is completed.

The Committee continues to be concerned with the difficulties that American Samoans are having in becoming integrated into American culture. These individuals possess a very unique relationship with the Federal Government and are able to travel to and from American Samoa and the United States as they wish. The vast majority of American Samoans in the United States reside in Hawaii and California. The Department of Education is encouraged to continue its efforts in addressing the unique and pressing problems of American Samoans through the two multifunctional resource centers in the Pacific Basin region.

Immigrant education

The Committee provides $30,000,000 for emergency immigrant education assistance, $1,278,000 more than the fiscal year 1988 comparable appropriation and the administration request and the same as the House allowance. The program provides grants to States with school districts enrolling substantial numbers of immigrant children. Awards are used to help cover the cost of providing educational services to these students. Participation is limited to States with school districts enrolling a minimum of 500 such students or where immigrant children represent at least 3 percent of the enrollment. In 1988, about 428,000 immigrant children will be served through this program.

Refugee Education

From 1980 to 1986, funds for refugee education were appropriated to the Department of Health and Human Services which transferred the funds to the Department of Education. The Refugee Assistance Extension Act of 1986, Public Law 99-605, transferred the authorization for the program to the Department of Education.

The Committee recommends $16,000,000 for refugee education assistance, $791,000 more than the 1988 comparable appropriation and the administration request and the House allowance. This program provides financial assistance to school districts to help meet the educational needs of refugee children. Awards are made to State educational agencies which in turn make grants to eligible local school districts. In 1988, about 82,215 refugee children were served under this program.

EDUCATION FOR THE HANDICAPPED

1988 comparable appropriation	$1,869,019,000
1989 appropriation request	1,916,882,000
House allowance	1,921,882,000
Committee recommendation	2,008,623,000

The Committee recommends an appropriation of $2,008,623,000 for education for the handicapped programs. This is $91,741,000 more than the administration's request, and $139,604,000 above the fiscal year 1988 appropriation. The Committee recommendation is $86,741,000 more than the House allowance.

The education for the handicapped programs provide assistance to the States to ensure that all handicapped children have access to a free appropriate public education. This assistance is provided through State grants which offset a portion of the excess costs incurred by State and local education agencies in educating handicapped children, and through a variety of discretionary programs that provide funds to meet designated Federal priorities.

State Grant Program

The Committee recommends an appropriation of $1,508,200,000 for the State Grant Program, $76,463,000 over the 1988 appropriation. This amount is $33,961,000 over the administration request and $29,661,000 over the House allowance.

This program supports formula grants to States to finance a portion of the excess cost of providing special education and related services to handicapped children. State grants are based on the number of handicapped children served. The fiscal year 1989 appropriation will become available for obligation on July 1, 1989, for use during the 1989-90 school year.

The Committee's recommended funding level represents approximately 8 percent of the estimated average per pupil expenditure, and would provide an estimated $356 per child for the 4.2 million children expected to receive special education during the 1989-90 school year.

The Committee is concerned about the relatively low number of children with serious emotional disturbance reported as served under part

B of the Education of the Handicapped Act, as compared to generally respected estimates of incidence, including figures as high as 3 million reported by the Office of Technology Assessment. The Committee also notes tremendous inconsistencies across States in reported numbers of such children served—from highs of 29 percent of the special education population to less than 1 percent in some States. Further data across agencies, such as education, mental health, child welfare, juvenile justice, and social security, suggest tremendous inconsistencies in children served and estimates of children needing services.

The Committee directs the Secretary of Education to examine this issue, including such concerns as: (1) whether significant numbers of children with serious emotional disturbance are presently not receiving a free appropriate public education as required under part B of the Education of the Handicapped Act; (2) whether problems in appropriately serving such children are affected by inconsistencies in terminology, definitions, and criteria across agencies and States; and (3) whether inconsistencies of Federal policies relating to terminology, definition, and criteria across agencies impede the identification and effective delivery of services to such children and their families. The Secretary is directed to report these findings, along with any legislative, regulatory or administrative changes that may be necessary to correct identified problems, by October 1, 1989.

Preschool Grant Program

For preschool grants, the Committee recommends an appropriation of $250,000,000. This amount is $48,946,000 more than the 1988 appropriation, $44,925,000 above the administration's request, and $44,925,000 over the House allowance.

The Preschool Grant Program provides formula grants to States based on the number of handicapped preschool children aged 3 through 5 receiving special education and related services. This funding level will permit an increase in the per child allocation from $400 to $500, as well as one-time transitional payments based on State estimates of additional children to be served. States will also receive an estimated $356 per child for preschool handicapped children through the State Grant Program. The Committee understands that there is significant disagreement between Department and State estimates of the additional children who will enter the Preschool Grant Program in the 1989–90 school year. As a result, it is difficult to estimate the size of the one-time transitional payment for these children available under the Committee recommendation.

Early Intervention Program

The Committee recommends an appropriation of $73,000,000 for the Early Intervention Program for handicapped infants. This is $5,982,000 more than the 1988 appropriation, $4,642,000 above the administration's request, and $4,642,000 above the House allowance.

Early Intervention Program grants assist States in developing and coordinating statewide programs for all handicapped children aged birth through 2 and their families. Eligible children include those with developmental delays and, at State discretion, those who are at risk of having substantial developmental delays if early intervention services are not provided. State allocations are based on the number of children in the general population aged birth through 2 years.

Bill language has again been included to make funds for early intervention grants available on July 1. This provision places the allocation of early intervention funds on the same schedule as that for the other State grant programs funded under the Education for the Handicapped Act.

Deaf-blind projects

The Committee recommends funding of $14,361,000 for deaf-blind projects, the same as both the 1988 appropriation and the House allowance. The administration requested funding for the program at the 1988 level as part of a new consolidated account.

This program funds centers, technical assistance awards, and model projects for children who are both deaf and blind. Centers provide technical assistance to States, as well as direct services to children whom States are not required to serve.

The Committee appropriates according to the existing account structure since the administration's legislative proposal to consolidate deaf-blind projects and severely handicapped projects has not been adopted.

The Committee believes the recommended funding level is sufficient to continue technical assistance and model projects for the 5,000 to 6,000 deaf-blind children nationwide and to provide direct services to the fewer than 500 deaf-blind children who are not already assisted under the Education of the Handicapped Act.

The Committee continues to be concerned that many model demonstration projects funded under the deaf-blind program serve severely handicapped children, only a fraction of whom may be deaf-blind. Therefore, the Committee directs all applicants for section 622 research and demonstration funds to identify which deaf-blind children will benefit from the projects by indicating the childrens' national registry code numbers. Of course, the Committee emphasizes that deaf-blind children, like all other handicapped children, should receive their education consistent with the principles set forth in Public Law 94–142.

Severely handicapped projects

The Committee has included $5,361,000 for the Severely Handicapped Program, the same as the 1988 appropriation and the House allowance. The administration requested funding for the program at the 1988 level as part of a new consolidated account.

This program awards contracts and grants for projects demonstrating the best methods of integrating severely handicapped children with their nonhandicapped or less severely handicapped peers.

As noted above, the Committee appropriates funding for this activity under the existing account structure since the administration's consolidation proposal has not been accepted.

Early childhood education

The Committee has included $23,428,000 for early childhood education, the same as the 1988 appropriation, the administration request, and the House allowance.

Early childhood education funds support demonstration projects, technical assistance, and research to aid States as they provide special education services to handicapped infants, toddlers, and children through 8 years of age. Special emphasis is placed on helping States implement the Early Intervention and Preschool Grant Programs.

The amount provided will maintain support for all continuations, including three research institutes, with $9,300,000 expected to be available for new projects.

Secondary and transitional services

The Committee recommends $7,372,000 for secondary and transitional services, the same as the 1988 appropriation, the administration request, and the House allowance.

This program provides grants and contracts to assist handicapped youths in the transition to postsecondary education, vocational training, competitive employment, continuing education or adult services, and to stimulate the improvement of programs for secondary special education. Of the total provided, $1,450,000 is expected to be available for new awards.

Postsecondary programs

The Committee has included $5,840,000 for postsecondary programs, the same as the 1988 appropriation, the administration request, and the House allowance.

This program supports efforts to improve postsecondary educational programs for handicapped persons. Program funds currently support two types of projects: direct services grants to postsecondary and vocational technical schools for serving deaf students; and demonstration projects which develop innovative models for delivery of support services or modify existing postsecondary educational opportunities. Of the amount provided, $2,140,000 will be available for new competitive awards to four institutions serving the deaf; $1,960,000 will support new demonstration projects.

Innovation and development

The Committee recommends an appropriation of $17,233,000 for innovation and development, the same as the 1988 appropriation, the administration request, and the House allowance.

This program supports and disseminates research regarding the educational problems of handicapped children. The recommended funding level will provide continued support for two research institutes, research syntheses, comprehensive service models for schools, and projects involving seriously emotionally disturbed children, as well as $2,700,000 for new projects.

Media and captioning services

The Committee recommends an appropriation of $13,216,000 for media and captioning services, the same as both the 1988 appropriation and the administration request, and $700,000 below the House allowance.

The primary focus of this program is the captioning of commercial films, the closed captioning of television, and the subsidy of the manufacture and distribution of closed caption decoder units. In addition, funds are awarded to the National Theater of the Deaf and Recordings for the Blind, Inc.

The amount provided will be sufficient to continue existing multiyear projects and to fund $4,000,000 in new grants. The Committee intends that Recordings for the Blind, Inc., receive a grant of $750,000 from the funds provided, and that the National Theater of the Deaf continue to receive a grant of $500,000.

The Committee intends that fiscal year 1989 funds be used for decoder production and development.

Special education technology

The Committee has included $10,000,000 for special education technology. This amount is $5,213,000 above the 1988 appropriation, the administration request, and the House allowance.

This program supports research, dissemination, and technical assistance related to the development, production, and marketing of technology for use in the education of handicapped children. Of the amount provided, about $7,400,000 is expected to be available for new projects.

The Committee intends that funds in excess of $4,787,000 appropriated under section 662 of the Education of the Handicapped Act shall be used to provide grants to States to help them develop and implement consumer-responsive statewide programs of technology-related assistance for individuals with disabilities and to enhance the Department's ability to provide the States with technical assistance and information relating to the provision of assistive technology devices and services and the funding of model demonstration programs.

Regional resource centers

The Committee recommends an appropriation of $6,415,000 for regional resource centers, the same as the 1988 appropriation, the administration request, and the House allowance. This program supports six regional centers and one national coordinating center that provide technical assistance and training to States to improve their capacity to serve handicapped children. The amount provided would permit the continuation of all six regional centers and the national coordinating center at their current levels. Bill language has again been included to permit the funding of the National Coordinating Center.

Recruitment and information clearinghouses

The Committee has included $1,149,000 for recruitment and information clearinghouses, the same as the 1988 appropriation, the administration request, and the House allowance.

Funds will be awarded on a continuation basis to support the three current clearinghouses: one disseminates information to parents and others regarding special education; a second provides information on postsecondary programs and services; and the third encourages individuals to pursue careers in special education.

Special education personnel development

The Committee recommends an appropriation of $69,410,000 for special education personnel development, $3,000,000 above the 1988 appropriation, the administration request, and the House allowance.

This program supports grants and contracts to help provide an adequate supply of special education teachers. Funds are awarded to colleges and universities, State departments of education, and other nonprofit organizations. At least 65 percent of the funds appropriated must be awarded to institutions of higher education, and 10 percent of the funding is required to be used for parent and volunteer training. The Committee has provided a funding increase in recognition of the expanding need for special education personnel trained to deal with infants and preschoolers. Of the amount provided, $29,000,000 will be available for new grants.

The Committee intends that of the funds provided for special education personnel development, 73 percent will be allocated for institutions of higher education under section 631(a); 7 percent will be allocated for special projects under section 631(b) to nonprofit agencies; 10 percent shall be allocated to private nonprofit agencies for parent training centers under section 631(c); and 10 percent shall be allocated for personnel training programs under section 632.

Special studies

The Committee recommends an appropriation of $3,638,000 for special studies, the same as the 1988 appropriation, the administration request, and the House allowance.

This program supports grants, contracts, and cooperative agreements to assess progress in the implementation of the Education of the Handicapped Act and the impact and effectiveness of State and local efforts to provide special education. A total of $1,700,000 would be available for new studies.

REHABILITATION SERVICES AND HANDICAPPED RESEARCH

1988 comparable appropriation	$1,590,400,000
1989 appropriation request	1,616,435,000
House allowance	1,656,592,000
Committee recommendation	1,669,395,000

The Committee recommends an appropriation of $1,669,395,000 for rehabilitation services and handicapped research. This is $52,960,000 more than the administration request and $78,995,000 more than the fiscal year 1988 appropriation. The Committee recommendation is $12,803,000 more than the House allowance.

Programs authorized under the Rehabilitation Act of 1973 support a variety of activities that help disabled persons maximize their potential for employment and independent living.

Basic State grants

The Committee has included $1,450,000,000 for vocational rehabilitation State grants, an increase of $70,500,000 above the 1988 appropriation and $42,910,000 above the administration request. The Committee recommendation is $8,423,000 more than the House allowance.

Basic State grant funds assist States in providing a range of services to help physically and mentally disabled persons prepare for and engage in meaningful employment. States provide at least a 20-percent match of these Federal funds. Authorizing legislation requires States to give priority to severely handicapped individuals.

Consistent with authorizing statute, one-quarter of 1 percent of the appropriation for basic State grants, or $3,625,000, is set aside for grants to Indian tribes.

Supported employment

The Committee has included $28,000,000 for the supported employment grant program. This amount is $2,065,000 above the 1988 appropriation, and $1,546,000 more than the administration request. The Committee recommendation is $1,546,000 more than the House allowance.

The supported employment grant program assists persons who may have been considered too severely disabled to benefit from vocational rehabilitation services to obtain competitive employment. Short-term vocational rehabilitation services are augmented with ongoing support provided by State and local organizations. Funds are distributed to States according to a population-based formula. Twenty-nine supported employment demonstration projects that were initiated prior to the creation of the formula grant are supported within special demonstration programs.

Special demonstration programs

The Committee recommends an appropriation of $27,195,000 for special demonstration programs for the severely disabled. This is $610,000 above the 1988 appropriation, the administration request, and the House allowance.

Special demonstration programs develop innovative techniques and comprehensive service programs to help severely handicapped individuals achieve satisfactory vocational outcomes or attain greater independent functioning. Of the amount provided, the Committee expects the Department to allocate $17,200,000 for special demonstration programs, $9,520,000 for the supported employment demonstration projects, and $475,000 for three model projects demonstrating statewide transitional planning services for severely handicapped youth. A total of $4,200,000 of the total provided would be available for new projects.

Recreational programs

The Committee has included $2,500,000 for recreational programs, $30,000 above the 1988 appropriation, and $120,000 below the House allowance. The administration requested no funding for recreational programs.

This program helps finance recreation activities, including sports, music, dancing, handicrafts and art, to aid in the mobility and socialization of handicapped individuals. Grants are awarded to States, public agencies, and nonprofit private organizations, including institutions of higher education.

Migratory workers

The Committee recommends $1,100,000 for migratory workers projects, the same as the 1988 appropriation, the administration request, and the House allowance. Migratory worker projects provide a 90-percent Federal match for comprehensive rehabilitation services to handicapped migrant and seasonal farmworkers and their families. Emphasis is given to outreach, specialized bilingual rehabilitation counseling, and coordination of vocational rehabilitation services with services from other sources.

As in previous years, bill language has been included to clarify that the Committee is providing a specific funding level for migratory worker projects rather relying on a percentage set-aside from the special demonstration programs.

Projects with industry

The Committee recommends an appropriation of $17,700,000 for projects with industry. This is $700,000 more than the 1988 appropriation, the administration request, and the House allowance.

Projects with industry provide disabled persons with training and experience in realistic work settings to prepare them for employment in the competitive market. Postemployment support services are also provided. Grants are made to a variety of agencies and organizations, including corporations, rehabilitation facilities, labor and trade associations, and foundations. The funding provided above the administration request will be available for new projects.

Helen Keller National Center

The Committee includes $4,800,000 for the Helen Keller National Center for Deaf-Blind Youths and Adults. This amount is the same as the 1988 appropriation and the administration request, and $200,000 below the House allowance.

The Helen Keller National Center consists of a residential training and rehabilitation facility; a network of 10 regional field offices which provide referral and counseling assistance to deaf-blind persons; and an affiliated agency network system of 26 agencies. About 3,500 clients are expected to be served in 1989, approximately 300 more than in 1988.

Client assistance

For client assistance, the Committee recommends $7,900,000, $400,000 more than the 1988 appropriation, and $250,000 more than both the administration request and the House allowance.

The Client Assistance Program funds State formula grants to assist vocational rehabilitation clients or client applicants in understanding benefits available to them and in dealing with service providers. Funds are distributed to States according to a population-based formula. States must operate client assistance programs in order to receive vocational rehabilitation State grant funds. The amount provided is sufficient to increase the minimum State allotment to $75,000.

Independent living

The Committee recommends an appropriation of $45,100,000 for independent living programs, of which $12,800,000 is for part A State grants for comprehensive independent living services, $26,500,000 is for support of part B independent living centers, and $5,800,000 is for part C services for older blind individuals.

The Committee recommendation of $12,800,000 for part A State grants for independent living services is $490,000 over the 1988 appropriation, and $244,000 above the administration request and the House allowance.

The part A State formula grant program finances services for individuals who are so severely disabled that they do not have the potential for employment, but will benefit from services which will enable them to live and function independently. These services may include counseling, housing, transportation, attendant care, recreational therapy, health maintenance, and preventive services.

For part B independent living centers, the Committee has included $26,500,000, $1,000,000 above the 1988 appropriation, the administration request, and the House allowance.

Part B independent living centers funding supports a network of nonresidential, community-based centers which provide a range of services to help severely disabled persons live more independently in family and community settings. Discretionary grants are awarded on a competitive basis to State vocational rehabilitation agencies.

The Committee recommendation of $5,800,000 for part C services to older blind individuals is $200,000 more than the 1988 appropriation, the administration request, and the House allowance.

The Part C program assists persons aged 55 or older to adjust to their blindness by increasing their ability to care for their individual needs. Services may include the provision of eyeglasses or other visual aids, mobility training, Braille instruction, guide services, reader services, and transportation.

Training

The Committee recommends an appropriation of $31,000,000 for training. This is $1,000,000 above the 1988 appropriation, the administration request, and the House allowance.

This program supports training, traineeships, and related activities designed to increase the numbers of qualified personnel providing rehabilitation services. Grants and contracts are awarded to States and public or nonprofit agencies and organizations, including institutions of higher education. Preservice, inservice, and continuing education programs are financed, as well as programs to train interpreters for the deaf. Approximately $8,800,000 of the funds provided would be available for new awards.

National Institute on Disability and Rehabilitation Research

The Committee recommends an appropriation of $53,100,000 for the National Institute on Disability and Rehabilitation Research [NIDRR]. This amount is $2,000,000 above both the 1988 appropriation and the administration request, and $850,000 below the House allowance.

The NIDRR operates research and training centers and rehabilitation engineering centers focused on a core topic area. Field-initiated research, career development fellowships, research and demonstration projects, and dissemination projects are also supported. About $12,600,000 of the amount provided would be available for new projects.

The Committee directs the Department to continue its emphasis on research related to services for handicapped infants, toddlers, and preschoolers, which is conducted by the pediatric rehabilitation research and training center funded by NIDRR. As a result of the amendments made by Public Law 99–457, which created a new State grant program of early intervention services for handicapped infants and toddlers, there is a significant and ongoing need for the systematic development of service delivery systems for this population, and for research and training strategies that can be disseminated nationwide.

The Committee is aware of the special needs of the more than 2 million Americans who are partially sighted. NIDRR is directed to identify the resources currently devoted to programs for the partially sighted and to provide an assessment of the establishment of a national information and referral center for these individuals. This information should be submitted in the form of a report to the Committee prior to fiscal year 1990 appropriations hearings.

The Committee was most pleased to learn that NIDRR plans to continue to support the Pacific basin research and training center. There are truly pressing needs throughout the Pacific basin region.

Evaluation

The Committee recommends an appropriation of $1,000,000 for evaluations. This is the same as the 1988 appropriation, the administration request, and the House allowance.

Funds are provided under this activity for studies to evaluate the impact and effectiveness of programs authorized by the Rehabilitation Act of 1973. Of the funds provided, $767,000 would be available for new studies.

VOCATIONAL AND ADULT EDUCATION

1988 comparable appropriation	$1,015,131,000
1989 appropriation request	1,031,095,000
House allowance	1,091,966,000
Committee recommendation	1,076,130,000

The Committee recommends an appropriation of $1,076,130,000 for vocational and adult education. This amount is $60,999,000 more than the administration request and $45,035,000 more than the fiscal year 1988 comparable appropriation. The House provided $1,091,966,000.

Vocational and adult education funds help to promote the development of a skilled and literate work force through expansion and improvement of vocational and adult education programs.

Basic grants

The Committee has included $835,000,000 for basic grants, $13,333,000 less than the administration request and the House allowance and $30,784,000 more than the fiscal year 1988 comparable appropriation.

Funds provided under the basic grant program assist States and outlying areas in expanding and improving their programs of vocational education and in providing equal opportunity in vocational education to historically underserved populations. Each State and outlying area may reserve up to 7 percent of its basic grant allocation for State administration. These funds may be used to satisfy the requirement that each State and the District of Columbia devote at least $60,000 of its basic grant funds to support the activities of a full-time sex equity coordinator.

Of the amount remaining, each State must spend a total of 57 percent for part A programs to provide vocational education opportunities to special needs populations as follows: 10 percent for the handicapped, 22 percent for the disadvantaged, 12 percent for adult training and retraining, 8.5 percent for single parents and homemakers, 3.5 percent for individuals participating in programs to eliminate sex bias and stereotyping, and 1 percent for criminal offenders in correctional institutions.

The remaining 43 percent is to be allocated for part B activities supporting vocational education program improvement, innovation, and expansion. Part B funds may be used for any of 24 specified purposes, including high technology programs, acquisition of equipment, renovation of facilities, and support of vocational education student organizations. Each State must spend for career guidance and counseling at least the amount it spent in fiscal year 1984, and some part B money must be used for inservice and preservice teacher training. Except for certain activities specified by regulation, part B funds may not be used merely to maintain existing programs.

In keeping with the provision of the Perkins Act, the recommended amount for basic grants includes $10,772,000 for the Indian Program and $2,154,500 for the Native Hawaiian Program.

State councils

The Committee recommends an appropriation of $8,000,000 for State councils on vocational education. This amount is $149,000 more than the comparable appropriation for fiscal year 1988 and the House allowance.

Funding for the State councils will support their activities in working with the State boards on vocational education. Each council reviews and comments on the State plan, analyzes and reports on the allocation of funds and the availability of vocational education programs in the State, completes a biennial evaluation of the State's programs, and conducts a number of other activities.

The Committee recognizes that State councils on vocational education are a major private sector influence to strengthen vocational education and encourages them to continue their efforts to infuse additional private sector consultation and advice into vocational education.

Community-based organizations

The Committee recommends $9,000,000 for the Community-based Organizations Program, $2,155,000 more than comparable appropriation for fiscal year 1988 and the House allowance. The administration did not request funding for this program. This program authorizes States to provide financial assistance for joint programs of eligible recipients and community-based organizations. The range of services includes transitional support services, prevocational education and basic skills training, internships, and guidance and counseling.

Consumer and homemaking education

The Committee has included $34,250,000 for consumer and homemaking education. This recommendation is $1,459,000 more than the fiscal year 1988 comparable appropriation and the House allowance. The administration did not request funding for this program. Under the Perkins Act, funds appropriated for the Consumer and Homemaker Program are allocated to the States according to the same formula used for basic grants.

Consumer and homemaking projects prepare youths and adults for the occupation of homemaker. Instruction is offered in the areas of food and nutrition, consumer education, family living and parenthood education, child development and guidance, housing, home management (including resource management), and clothing and textiles. At least one-third of each State's allotment must be used in economically depressed areas or areas with high rates of unemployment. Up to 6 percent may be used for State leadership activities.

National research and data programs

The Committee recommends an appropriation of $26,800,000 for national programs under title IV, $1,889,000 more than the administration request and $1,142,000 more than the comparable appropriation for fiscal year 1988 and the House allowance.

The Committee expects that $5,744,000 shall support the National Center for Research in Vocational Education, $802,000 shall be used to support curriculum coordination centers, and $504,000 shall be used to fund discretionary research on vocational education. The Committee further expects that $5,000,000 shall be set aside for support of the National Occupational Information Coordinating Committee [NOICC]. NOICC and its affiliated State occupational information coordinating committees assist students, educators, and occupational planners in determining future labor market conditions by improving and disseminating job information. NOICC has been jointly funded by the Departments of Education and Labor since 1978.

The Committee has provided the remaining $14,750,000 to cooperative demonstration programs authorized under section 411 of the Perkins Act. The Committee intends for these funds to continue to support the dropout prevention and high technology occupations demonstration activities begun in fiscal year 1988. Within the amount provided, the Committee expects that $4,787,000 shall be used for second year continuation awards for exemplary dropout prevention programs. The remaining $9,963,000 shall be used for a second competition for awards under the high technology occupations program.

Bilingual vocational training

The Committee recommends $3,900,000 for bilingual vocational training, $166,000 more than the comparable fiscal year 1988 appropriation and the House allowance. The administration did not request funds for this program.

This program provides funds on a competitive basis to State and local public agencies, higher education institutions, and private organizations to train limited English proficient students, provide instructor training, and develop instructional materials.

ADULT EDUCATION

The Committee has included $159,180,000 for adult education, $25,144,000 more than the fiscal year 1988 comparable appropriation and $9,180,000 more than the administration request. The House provided $166,754,000.

Adult education State grants

For adult education State grants, the Committee provides $138,000,000, $22,633,000 more than the fiscal year 1988 comparable appropriation and $10,000,000 less than the administration request and the House allowance.

Funds support programs that assist educationally disadvantaged adults in developing basic skills, including literacy, and in achieving certification of high school equivalency. Funds are allocated to States and outlying areas based, in part, on the number of persons age 16 and over in a State who do not have high school diplomas and who are not required to be enrolled in school. Adult education provisions included in the Hawkins-Stafford amendments allow Federal funds to support up to 90 percent of each State's program in fiscal year 1989, which is consistent with the previous authorization. However, in future years, the State matching requirement will increase to 25 percent through a reduction in the maximum Federal share by 5 percent each year until fiscal year 1992. The amendments require each State to use at least 10 percent of its grant to serve the incarcerated and institutionalized. The previous act prohibited States from using more than 20 percent but set no minimum for this purpose.

National programs

The Committee provides $2,000,000 for adult education national programs, $85,000 more than the fiscal year 1988 comparable appropriation, and the same as the administration request and the House allowance.

The adult education national programs include research, development, demonstration, dissemination, and evaluation activities. The Hawkins-Stafford amendments expand the program to include several newly authorized activities including: grants for adult education programs for migrant farmworkers and immigrants, grants to train adult volunteer tutors, a broad program of assistance to States in evaluating adult education programs, an assessment of the extent of adult illiteracy, and research on the special needs of persons requiring adult education.

Literacy training for homeless adults

The Committee provides $7,180,000 to carry out adult literacy provisions of the Stewart B. McKinney Homeless Assistance Act, the same as the fiscal year 1988 comparable appropriation and the House allowance. The administration did not request funds for this program.

Funds shall be used for grants to State education agencies to develop State plans and implement programs of literacy training and basic skills remediation for homeless adults. Each State's plan must include a program of outreach activities, and be coordinated with existing resources such as community-based organizations, adult basic education programs, and nonprofit literacy organizations. For fiscal years 1987 and 1988, funds for this program were distributed among the States based on a formula similar to the one used for allocations under the Adult Education Act. For fiscal year 1989, the program, as modified by the Hawkins-Stafford amendments, will be a discretionary program; however, in making awards to State education agencies, consideration will be given to the States' estimates of the number of homeless adults expected to be served and the number of such adults in each school district.

Workplace literacy partnerships

The Committee provides $12,000,000 for workplace literacy grants, $2,426,000 than the fiscal year 1988 comparable appropriation and the House allowance. The administration did not request funds for this program.

This program provides funds for demonstration grants for exemplary education partnerships that provide literacy training to meet workplace needs. These demonstration projects are designed and operated by partnerships between business, industry, labor organizations, or private industry councils and State education agencies, local education agencies, institutions of higher education, or schools. Programs are designed to improve the productivity of the work force through improvement of workers' literacy skills. Services may include: adult secondary education; adult literacy and basic skills training; literacy training for limited English proficient adults; updating basic skills to reflect the changing needs of the workplace; improving the competency of adult workers in speaking, listening, reading, and problem solving; educational counseling; transportation; and child-care services. Federal funds may support up to 70 percent of the cost of each program.

STUDENT FINANCIAL ASSISTANCE

1988 comparable appropriation	$5,554,792,000
1989 appropriation request	6,099,597,000
House allowance	5,907,736,000
Committee recommendation	5,837,095,000

The Committee recommends an appropriation of $5,837,095,000 for student financial assistance, which is $292,303,000 more than the amount provided in fiscal year 1988. It is $262,502,000 less than the budget request. The administration's proposal for student aid is based on a legislative reform package which would suspend the assessment of nonliquid assets in the determination of financial need and require all students to have a high school diploma or its equivalent to be eligible for Federal student assistance. The Committee has not incorporated either one of these proposals in the accompanying appropriations bill.

Proprietary school abuses

The Committee is concerned about increasing reports that some for-profit postsecondary institutions are taking advantage of disadvantaged students and abusing the Federal student aid programs. The enrollment of individuals who are not adequately prepared for the programs of study in which they are being enrolled, the use of misleading recruiting techniques, and the poor quality training programs offered by certain institutions have resulted in instances of high dropout rates, low job placement rates, and high student loan default rates in this fast-growing sector of postsecondary education.

This problem is most clearly evident in the high default rates at many for-profit institutions: over 600 proprietary schools had Federal loan default rates of over 50 percent in fiscal year 1985. The dropout and default rates were particularly high for those students who were enrolled without having a high school diploma or its equivalent. A recent study by the General Accounting Office found dropout rates of up to 75 percent for this group of students. Other evidence indicates that about 40 percent of the students who drop out from proprietary schools also default on their education loans.

In order to help conserve scarce Federal resources and to provide consumer protection for students, the Committee recommends two reform efforts. First, the Committee believes it is appropriate to require students to possess a high school diploma or its equivalent to be eligible to receive any title IV assistance for study in vocational programs leading to employment in a profession that requires a high school diploma or its recognized equivalent for certification. The Committee has thus included bill language that would prohibit institutions from enrolling these students under the ability to benefit criterion.

Second, the Committee believes the Secretary using existing authorities should not recognize an accrediting agency unless that agency requires the provision of reliable student consumer information (such as graduation and job placement rates), and requires schools to identify and measure student outcomes (such as completion rates, placement rates, and test scores). Also, in order to prevent problem schools from shopping around for a willing accreditor, a recognized accrediting agency should not be allowed to accredit a school or program that has had its accreditation status refused or revoked by another recognized agency within the previous 12 months.

Pell grants

The Committee recommends $4,568,000,000 for Pell grants with a maximum award of $2,300. This funding level is $307,570,000 more than the fiscal year 1988 appropriation and $443,000,000 less than the President's budget request.

Pell grants provide financial assistance to help financially needy undergraduate students pay their educational costs. These grants provide the base upon which other financial assistance is built. Under the 1988 appropriation, maximum grants in school year 1988–89 cannot exceed $2,200 per student or 60 percent of the cost of attendance. The administration proposed an increase in the maximum award for school year 1989–90 to $2,300, $100 over the maximum award in effect for the previous year. The Committee concurs on the proposed increase in the maximum award but believes the administration's estimate to achieve this policy objective is exaggerated. The Committee has based its funding recommendation on CBO estimates of the amount needed to fund a program with a $2,300 maximum.

The administration's reform proposal to suspend nonliquid assets from the determination of need would increase Pell grant costs by $266,000,000, while the proposal to require a high school diploma or a GED would decrease Pell grant costs by $187,000,000. The net cost of these proposals is an increase of $79,000,000 in Pell costs in 1989.

The Committee disagrees with the proposal to suspend nonliquid assets from the determination of need as this would have a regressive effect shifting more awards to middle-income families as opposed to targeting assistance on the economically disadvantaged as is the primary purpose of the Pell grant program. The Committee concurs in the assessment that proprietary school abuses do exist but is unprepared at this time to require—without exception—a high school diploma or its equivalent to be eligible for student financial assistance.

Student aid administrator waiver authority

The Committee is concerned about the estimated cost of the recently enacted authority for financial aid administrators to alter a student's Pell grant award. With ever-increasing institutional competition for student enrollment and student willingness to accept increased grant awards, this new authority provides a substantial potential for institutions to increase Pell awards. The Committee notes that this provision is estimated to cost $166,000,000 in fiscal year 1989. From a strictly appropriations perspective the Committee believes this is a program change we cannot afford in a year of limited 302(b) allocations. Therefore, the Committee has included bill language that would eliminate the unregulated authority for financial aid administrators to alter a student's Pell grant award by changing the expected family contribution or the costs of education amount.

Recognizing that there is a need for limited aid officer authority to adjust awards when the base year data are not an accurate reflection of a student and family's ability to pay the costs of postsecondary attendance, the Committee also recommends limited Secretarial authority to prescribe regulatory criteria for determining such special circumstances in which the expected family contribution determination may be adjusted. In these special cases, such as a recent death, disability, or loss of employment, the annual adjusted family income would be calculated using estimated data for the first calendar year of the award. year instead of actual data for the calendar year immediately preceding the award year.

Supplemental educational opportunity grants

The Committee recommends $416,583,000 for supplemental educational opportunity grants which is $8,168,000 more than the fiscal year 1988 appropriation. This is the same as the administration's request of $416,583,000.

Funds are made available to postsecondary institutions to provide institutionally administered need-based aid to undergraduate students. The aid provided is supplementary to Pell grants. These supplementary grants are administered by institutional aid officers who have flexibility in determining student awards. The maximum grant level will remain at $4,000.

The administration has proposed legislative changes for SEOG's (and work-study) in an effort to promote greater institutional accountability for program administration. In order to receive fiscal year 1989 SEOG (and work-study) funds, institutions would be required to develop and submit to the Department for approval a plan for the implementation of performance criteria, such as job placement rates, program completion rates, or aggregate student gains on standardized tests. Beginning in academic year 1990–91, SEOG (and work-study) institutional allocations would be contingent on each school's compliance with its performance-base criteria plan. No legislative action has been taken on these proposals.

Work-study

For work-study, the Committee provides $600,014,000, which is $11,765,000 more than the fiscal year 1988 funding level and the same as the administration's request.

The Work-Study Program assists students, through part-time employment, to meet the costs of postsecondary education. Grants are awarded to qualifying institutions which select needy students to participate. Needy undergraduate and graduate students may participate. The administration has proposed legislation which: (1) would accelerate the rate of increase through 1991 in matching requirements of nonprofit employers; that is, the Federal share would not exceed 70 percent in 1989–90, rather than the current share limit of 80 percent; and (2) would eliminate for-profit employers, including proprietary schools, from eligibility as work-study employers. No legislative action has been taken on these proposals.

Perkins loans

The Committee recommends $204,736,000 for Perkins loans: $182,736,000 for Federal capital contributions and $22,000,000 for loan cancellations. This is $5,892,000 less than the 1988 appropriation of which $24,892,000 was for loan cancellations and $185,736,000 was for capital contributions. The administration requested $22,000,000 for loan cancellations only.

The Perkins Loan Program provides long-term, low-interest loans to financially needy students to enable them to finance the costs of postsecondary education. Loans are made from an institution's revolving loan fund made up of a Federal capital contribution, which is matched by an institutional contribution, student payments on prior loans and Federal cancellation payments. Appropriations for loan cancellations reimburse institutional revolving funds for loans cancelled due to statutorily specified types of teaching, military or public service

Loan defaults have plagued the Perkins Loan Program since its inception. Some progress has been made over the past few years relative to the exercise of due diligence in school-level default collections, loan collection operations in general, and effective assignment of problem defaults to the Department to allow Federal-level collections measures. Congress, in the higher education amendments in 1986, further strengthened the provision to penalize institutions with high default rates through reductions in new Federal capital made available for loans at those institutions.

Institutions, however, have been improving Perkins loan collection practices, and continue to do so. For the latest year that information is available, the institutional default rate is 7.68 percent compared to 8.27 percent in the previous year.

Income contingent loans [ICL's]

The Committee recommends $5,000,000 for income contingent loans, $692,000 more than the 1988 appropriation. The administration requested $50,000,000 for an expanded Income Contingent Loan Program to increase the number of participating institutions and to open participation to consortia of institutions, to allow institutions to sell ICL's and use the profits for new ICL awards to extend eligibility to graduate students, and to allow combined Federal loan repayment of ICL's, NDSL, or Perkins loans.

ICL's are institutionally administered unsubsidized loans, averaging $2,000 in 1988, for which repayment schedules are income-contingent. Loans are made from a combination of a Federal contribution and an institutional match of one dollar for every nine Federal dollars.

State student incentive grants

For the State Student Incentive Grant Program, the Committee provides $42,762,000 which is $30,000,000 less than the fiscal year 1988 level. The administration request did not include funds for this program.

Under this program, States are encouraged to develop and expand need-based grant programs to postsecondary students through the availability of Federal grant funds. States must equally match these Federal funds with State funds and use them to support grants to financially needy students. Grants and job earnings are limited to $2,500 per academic year for full-time students.

GUARANTEED STUDENT LOANS

1988 comparable appropriation	$2,565,000,000
1989 appropriation request	2,735,598,000
Houses allowance	3,174,400,000
Committee recommendation	3,174,400,000

The Committee recommends an appropriation of $3,174,400,000 for guaranteed student loans [GSL's]. This is $609,400,000 more than the 1988 appropriation and $438,802,000 more than the administration's budget request. The administration's request of $2,735,598,000 is based on legislative changes to achieve savings which have not been adopted by the Congress.

The GSL Program is designed to promote the availability of low-interest loans from banks and other lenders to students and their parents to help meet the costs of postsecondary education. This is accomplished through the provision of Federal insurance, reinsurance, and interest subsidies.

Federal costs associated with direct insurance include payments for borrower default, death, disability and bankruptcy, collection and administrative expenses.

In general, however, the program is administered through State and private nonprofit guarantee agencies which insure loans directly, collect defaulted loans, and provide various services to lenders. To support the insurance of student and parent loans, the Federal Government provides guarantee agencies with loan advances, reinsurance payments for borrower default, death, disability and bankruptcy, and administrative allowances.

The Federal Government also pays an interest subsidy to lenders, equal to the borrower's interest rate, on behalf of regular GSL student borrowers while they are in school and during certain grace and deferment periods. To be eligible for this subsidy all students must demonstrate need. A Federal special allowance is also paid to participating lenders, which assures them a total yield equal to the most recent quarterly average 91-day Treasury bill rate plus 3.25 percent. Regular GSL student borrowers are charged a 5-percent origination fee which helps offset these Federal subsidies.

Actions to enhance student loan collections

Despite extensive efforts to collect on defaulted accounts, both the gross and net (reflecting collections on defaults) default rates are increasing. The net default rate has increased from 8.9 percent in 1985 to 9.5 percent in 1987. The annual cost of these defaulted accounts exceeds $1,600,000,000.

To combat this problem, the Department will continue its efforts to collect on defaulted accounts through the use of private sector collection agencies, the Federal employee salary and the IRS tax refund offset programs, and through the referral to the Justice Department for litigation accounts where defaulters refuse to repay voluntarily.

The Committee recognizes that there are other reasonable actions that can be taken to reduce the default problem that do not require congressional action. In this vein, the Committee urges the Department to pursue its accountability initiatives by requiring through regulations that institutions obtain additional information from borrowers that would make it easier to locate those who are delinquent or in default. Thus, institutions would be required to obtain, during the exit interview, the borrower's driver's license number, the name and address of the borrower's expected employer after graduation, and the address of the borrower's next of kin.

National student loan data system

In an effort to improve program integrity and reduce defaults, the Committee has included $5,600,000 to fund the student loan data system. The program is funded within the "Program administration" account and language has been included to permit these funds to be available only for the student loan data system. This data system should be used to verify compliance with eligibility rules, such as aggregate loan limits and the prohibition against student loan defaulters receiving further Federal assistance. According to the Department, the use of the system to enforce loan limits and avoid providing new loans to defaulters could save taxpayers millions of dollars annually in erroneously awarded student assistance. The Committee would make the availability of these funds contingent on the removal of the statutory prohibition against the mandatory use of the student loan data system to verify or obtain information before lenders, guaranty agencies, or schools, could make, guarantee, or certify a student loan, as well as other provisions that prevent the system from being cost effective.

HIGHER EDUCATION

1988 comparable appropriation	$534,471,000
1989 appropriation request	450,195,000
House allowance	577,368,000
Committee recommendation	543,508,000

The Committee recommends an appropriation of $543,508,000 for the "Higher education" account. This is $93,313,000 more than the administration request and $33,860,000 less than the House allowance. The recommendation is $9,037,000 more than the fiscal year 1988 appropriation.

This account is comprised of programs that assist postsecondary students and institutions of higher education in various priority fields and that continue the Nation's commitment to historically black colleges and universities.

Aid for institutional development

The Committee recommends $169,978,000 for aid for institutional development, $17,608,000 above the 1988 appropriation and $33,000,000 above the administration request. This amount is $10,022,000 below the House allowance. Of the total, the Committee recommends $77,300,000 for strengthening institutions (part A); $84,978,000 for strengthening historically black colleges and universities (part B), with $10,531,000 of that amount set aside for postgraduate section 326 institutions; and $7,700,000 for endowment challenge grants (part C).

Strengthening institutions.—The part A discretionary grants support 1-year planning grants and multiyear development grants for institutions with low average expenditures per student and a significant percentage of financially needy students. Sufficient funding has been provided so that new awards can be made to both 2- and 4-year institutions in 1989. The Committee also includes bill language to permit up to $7,300,000 of the total provided for part A grants to be used for noncompeting continuation awards made to 4-year institutions in 1988.

The Committee understands that the authorizing committee plans to reexamine the formula for the allocation of funds under part A of title III and encourages the Committee in that effort.

Historically black colleges and universities.—Part B authorizes formula grants to historically black colleges and universities that may be used to establish or strengthen physical plants, financial management, academic resources, and endowments. Section 326 discretionary grants are directed to five historically black postgraduate institutions for similar purposes. Authorizing legislation sets aside $3,000,000 of the section 326 funds for the Morehouse School of Medicine. Any section 326 grant above $500,000 must be matched dollar-for-dollar. If the five institutions do not qualify for the full $10,531,000 set-aside, those funds not awarded under section 326 will be awarded to other historically black colleges and universities under part B. Section 326 funding is increased in recognition of the severe financial difficulties faced by Atlanta University. The Committee urges the Department to give the needs of Atlanta University every consideration as these grants are awarded through the competitive process.

Endowment challenge grants.—Institutions eligible for part A or B grants may also apply for part C endowment challenge grants, which generally must be matched dollar-for-dollar by the institution. Part C funds remain available until expended.

The Committee urges the Department to give favorable consideration within the competitive process to an endowment challenge grant proposal from the School of Business and Industry at Florida A&M University. The Committee understands that the grant would address the declining black enrollment in the Nation's business administration programs by creating an endowment fund for fellowships for needy students. Matching funds are expected to be available from both the State government and the private sector.

Minority Science Improvement Program

The Committee recommends $5,371,000 for the Minority Science Improvement Program, $105,000 above the 1988 appropriation and the same as the administration request and the House allowance.

This program provides discretionary grants to institutions with minority enrollments greater than 50 percent to purchase equipment, develop curricula, and support advanced faculty training. Grants are intended to improve science education programs and increase the number of minority students in the fields of science, math, and engineering.

International education and foreign language studies

The Committee recommends $30,685,000 for the domestic and overseas components of this program. This is the same as both the 1988 appropriation, the administration request, and the House allowance.

The Committee recommends $25,419,000 for the domestic programs and $5,266,000 for the overseas programs.

Under these programs, grants are provided to help finance American education in unusual foreign languages and in area and international studies that are not commonly taught. Domestic programs include: national research centers, fellowships, research projects, and business and international education projects. Overseas projects include: group projects, faculty research, doctoral dissertation research, and special bilateral projects.

Fund for the improvement of postsecondary education

The Committee recommends $11,645,000 for the fund for the improvement of postsecondary education. This amount is the same as the 1988 appropriation, and $2,000,000 below both the administration request and the House allowance.

The fund supports exemplary, locally developed improvement projects which have potential for addressing problems and recommending improvements in postsecondary education. The Committee encourages the Department to use the fund to demonstrate ways to lower undergraduate dropout rates among minority students.

Innovative projects for community services

The Committee includes $1,472,000 for innovative projects for community services, the same as both the 1988 appropriation and the House allowance. The administration did not request funds for this program.

Administered through the fund for the improvement of postsecondary education, the program supports projects to determine the feasibility of encouraging student participation in community service projects in exchange for educational services or financial assistance. The Committee recommendation provides funding to continue testing the community services concept for an additional year. The Department is requested to submit a report evaluating the projects financed with the first year of funding prior to the fiscal year 1990 hearings.

Cooperative education

The Committee has included $13,787,000 for cooperative education, which is the same as both the 1988 appropriation and the House allowance. The administration did not request funding for this program.

The Cooperative Education Program funds administrative grants for projects providing work experiences for students that relate to their chosen field and provide earnings to help finance their college education.

The Committee believes the recommended funding level is appropriate given the widespread establishment of cooperative education programs during the past 15 years.

Bill language has been included to direct the Department to give special consideration in the cooperative education grant competition to applications from private urban institutions with high minority enrollments and plans to convert to a universal cooperative education curriculum.

Special programs for the disadvantaged

The Committee recommends $215,841,000 for special programs for the disadvantaged, commonly known as TRIO. This amount is $10,000,000 above both the 1988 appropriation and the administration request, and $12,159,000 below the House allowance.

The TRIO programs include: Upward Bound, which offers disadvantaged high school students academic services to develop the skills and motivation needed to continue their education; student support services, which provides remedial instruction and counseling to disadvantaged college students to help them complete their education; Talent Search, which identifies and counsels young persons regarding opportunities for completing high school and enrolling in postsecondary education; educational opportunity centers, which provide information and counseling on available financial and academic assistance to adults in low-income areas; and the Ronald E. McNair Postbaccalaureate Achievement Program, which provides research internships, seminars, tutoring, and other activities to encourage disadvantaged college students to enroll in postgraduate programs. The Staff Training Program supports training activities for TRIO project staff.

The Committee has been disturbed by the Department's disregard of 1988 conference report language relating to the TRIO programs, especially its refusal to fund the Ronald E. McNair Postbaccalaureate Program. As a result, the Committee has included bill language identifying a specific appropriation for the McNair Postbaccalaureate Program of $1,000,000.

Veterans' educational outreach

The Committee recommendation includes $2,872,000 for veterans' educational outreach, the same as both the 1988 appropriation and the House allowance. The administration requested no funding for this program.

This program provides formula grants to postsecondary institutions to help support offices of veterans' affairs which provide outreach, recruitment, special educational services, and counseling. Funds are allocated based on the number of enrolled veterans. In fiscal year 1988, approximately 625 grants are expected to be awarded, averaging about $4,600.

Interest subsidy grants

The Committee recommends $22,744,000 for interest subsidy grants, which is the same as both the administration request and the House allowance. It is $866,000 more than the 1988 appropriation.

This mandatory appropriation is required to meet the Federal commitment to pay interest subsidies on about 570 prior-year loans for the construction of postsecondary academic facilities. No new interest subsidy commitments have been entered into since 1973. However, subsidy payments on existing loans are expected to continue until the year 2013.

Academic facilities construction grants

The Committee does not include funding for academic facilities construction grants. This amount is $6,366,000 less than the 1988 appropriation and the same as the House allowance. The administration did not request funding. In the past, this account has financed construction grants to institutions of higher education.

Special higher education projects

The Committee does not include funding for any special higher education projects. This amount is $14,217,000 less than the 1988 appropriation and the same as the House allowance. The administration did not request funding for any projects. In the past, this account has financed construction grants to specific institutions.

Patricia Roberts Harris graduate fellowships

The Committee recommends $15,304,000 for this program, which is the same as both the 1988 appropriation and the administration request, and $1,196,000 below the House allowance.

This program provides discretionary grants to postsecondary institutions to assist minority and women students in pursuing graduate and professional study in fields in which they have been traditionally underrepresented. Approximately 50 percent of the fellowships are awarded for engineering and the physical and life sciences.

The Committee recommendation provides sufficient funding for about 950 fellowships. The Committee believes this program is very important in its mission of increasing graduate educational opportunities for women and minorities.

The Committee includes bill language directing that $239,000 of this amount be competitively allocated to a consortium of historically black colleges and Ph.D. granting institutions which would identify minority undergraduate students and nondoctoral faculty members with an interest in doctoral training and place them at institutions which provide tuition and student stipends. The consortium would use Federal funds to supplement the assistance from the participating schools.

Patricia Roberts Harris public service fellowships

The Committee recommends $3,221,000 for public service fellowships, which is the same as the 1988 appropriation and $279,000 below the House allowance. The administration did not request funding for this program.

Grants are awarded on a competitive basis to institutions of higher education for fellowships in order to increase the number of graduate students trained for leadership and management positions in public service. The Committee recommendation provides sufficient funding to support about 215 fellowships.

Jacob K. Javits fellowships

The Committee includes $6,702,000 for Javits fellowships, which is the same as both the 1988 appropriation and the administration request, and $1,598,000 below the House allowance.

This program provides fellowships to students for graduate study in the arts, humanities, and social sciences. The fellowships are awarded through a national competition, and recipients pursue graduate study at the institution of their choice. The Committee's recommended funding level is sufficient to support about 450 fellowships.

Legal training for the disadvantaged

The Committee has recommended $1,915,000 for legal training for the disadvantaged, which is the same as the 1988 appropriation, the administration request, and the House allowance.

Legal training for the disadvantaged supports law school scholarships and prelaw training for individuals from disadvantaged backgrounds to help them enter and complete law school. Funds are awarded by noncompetitive grant to the Council on Legal Education Opportunity [CLEO], which administers the program and receives additional funds from private sources. About 650 students will be assisted in 1989.

Law school clinical experience

The Committee includes $3,830,000 for the Law School Clinical Experience Program, the same as the 1988 appropriation and $170,000 less than the House allowance. The administration did not request funding for this program.

This program, funded since 1978, supports grants to law schools for the administrative costs of expanding or establishing clinical experience programs for law students. About 60 law schools will receive awards with the funds provided by the Committee.

Graduate assistance in areas of national need

The Committee recommends $7,659,000 for the Graduate Assistance in Areas of National Need Program, which is the same as the 1988 appropriation and $5,341,000 below the House allowance. The administration did not request funding for this program.

The Secretary awards grants to graduate academic departments and programs in areas of study determined to be of national need. Suggested subjects include mathematics, physics, biology, chemistry, and engineering. Grants must be used for graduate student fellowships. Recipients must have financial need, excellent academic records, and plans to pursue a teaching or research career. About 460 students could continue to be supported with the Committee's recommended funding level.

Minority participation in graduate education

The Committee provides $3,351,000 for minority participation in graduate education, which is the same as both the 1988 appropriation and the administration request, and $335,000 below the House allowance. The program provides grants to institutions of higher education to support fellowship aid to needy undergraduate minority students to help them prepare for graduate study. Funds are used for stipends, room and board costs, transportation and tuition for summer research internships and seminars. The Committee allowance would assist about 1,120 fellows.

Robert C. Byrd honor scholarships

The Committee has included $8,300,000 for the Robert C. Byrd Honors Scholarship Program, $641,000 above the 1988 appropriation and the administration request and the same as the House allowance.

This program recognizes students who have demonstrated outstanding academic achievement by awarding $1,500 nonrenewable scholarships for the first year of study at any institution of higher education. Awards are based solely on merit.

The Secretary of Education shall assign the number of scholarships to a State based on school-age population in the State. No State (including the District of Columbia and Puerto Rico) shall receive fewer than 10 scholarships. The Secretary of Education shall ensure that State education agencies select recipients such that all parts of the State are fairly represented.

Assistance to Guam

The Committee recommends $479,000 for assistance to Guam, which is the same as both the 1988 appropriation and the House allowance. The administration did not seek funding for this program.

Assistance to Guam is authorized to provide partial reimbursement to the University of Guam for costs incurred in providing postsecondary education services to students from other Pacific-area United States territories.

Robert A. Taft Institute of Government

For the Robert A. Taft Institute of Government in New York, the Committee recommends $718,000, the same as both the 1988 appropriation and the House allowance. The administration did not request funding for this program.

A dollar-for-dollar matching grant is provided to the institute to assist in developing education programs to train elementary and secondary teachers in the principles of democracy and the governmental processes of the United States.

Paul Douglas teacher scholarships

The Committee recommends $14,840,000 for the Paul Douglas teacher scholarships, which is the same as the 1988 appropriation and $1,160,000 below the House allowance. The administration did not seek funding for this program.

This program encourages outstanding high school graduates to pursue teaching careers in elementary and secondary education. State education agencies receive formula grants to provide up to $5,000 per year to recipients chosen on the basis of merit. Recipients must agree to teach for 2 years per year of supported study or repay the amount of the scholarship with interest. About 3,000 students could be supported by the Committee's recommended funding level.

School, college, and university partnerships

The Committee provides $2,794,000 for the School, College, and University Partnerships Program, which is $400,000 above both the 1988 appropriation and the House allowance. The administration did not request funding for the program.

The program promotes joint projects between colleges and universities and high schools serving low-income students which will increase students' academic skills and enhance their prospects for postsecondary education. By statute, a portion of the appropriation is set aside for four specific community colleges. The funding provided by the Committee would support about nine projects.

The Committee encourages the Department to use the additional funds provided above the 1988 level to support a demonstration project that would link secondary schools, a community college and a university offering a doctoral program in industrial technology. The project would identify low-income students who would begin their preparation during their junior year in high school, continue their training at the community college, and complete the degree program at the university.

COLLEGE CONSTRUCTION LOAN INSURANCE

1988 comparable appropriation	$19,148,000
1989 appropriation request	
House allowance	
Committee recommendation	

The Committee does not provide additional funding for the College Construction Loan Insurance Association, which is the same as the House action. The administration did not request funding for this program.

The association was created as a nongovernmental corporation to guarantee loans and bonds for postsecondary institutions to enable them to obtain financing for facility construction and renovation. The Department of Education and the Student Loan Marketing Association were authorized to purchase association stock to help capitalize the corporation.

The fiscal year 1988 appropriation of $19,148,000 permitted the Department of Education to purchase sufficient stock, so that, when combined with purchases by the Student Loan Marketing Association and private institutions, the association has been adequately capitalized to obtain a triple A debt rating. As a result, consistent with assurances the Committee received from the association last year, no further appropriation is required.

HIGHER EDUCATION FACILITIES LOANS

This account services a portfolio of subsidized loans that were made to colleges and universities in the 1970's for the construction and renovation of academic facilities. No appropriation is requested or provided because operating income is expected to be sufficient to finance all expenses of the loan fund. The Committee rejects the administration's proposed bill language to overturn the statutory prohibition against further loan sales.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS

1988 comparable appropriation	$62,231,000
1989 appropriation request	1,675,000
House allowance	63,906,000
Committee recommendation	1,675,000

The Committee does not provide new borrowing authority for college housing loans. The House recommended $62,231,000 in new loan authority. No new borrowing authority was requested by the administration. In 1988, $62,231,000 in loan authority was provided.

The Committee does provide $1,675,000 to pay for the interest shortfall on 1987 and 1988 loan commitments. This amount was requested by the administration and included in the House allowance.

This account supports financing for the construction and renovation of postsecondary housing and other academic facilities through direct, subsidized loans made from a general fund. Loans are provided at interest rates no higher than 5.5 percent and for terms of not more than 30 years. Consistent with the Higher Education Act Amendments of 1986, since 1987, the Department has provided new loans to institutions by borrowing from the Treasury. Appropriations are required to pay the interest shortfall on the subsidized loans. Loans made prior to 1987 were financed by a revolving fund which is managed under the "College housing loans" account.

While the Committee has not provided new borrowing authority within this account, facility renovation and construction assistance is expected to be available through the College Construction Loan Insurance Association.

COLLEGE HOUSING LOANS

This account finances activities related to the management of college housing loans made from the revolving fund prior to 1987 under title IV of the Housing Act of 1950. No appropriation is requested or provided because principal repayments and interest revenue on prior-year loans will be adequate to pay for current-year program operating costs.

The Committee rejects the administration's proposed bill language to overturn the statutory prohibition against further loan sales.

EDUCATIONAL RESEARCH AND STATISTICS

1988 comparable appropriation	$67,526,000
1989 appropriation request	84,400,000
House allowance	83,512,000
Committee recommendation	74,460,000

The Committee recommends an appropriation of $74,460,000 for educational research and improvement. The recommendation is $6,934,000 over the fiscal year 1988 appropriation, $9,940,000 less than the administration request, and $9,052,000 less than the House allowance.

Educational research and statistics funds are administered by four program offices. The National Center for Education Statistics collects, analyzes, and reports education statistics. Its major activities include collection of data on educational institutions at all levels; the national assessment of educational progress [NAEP], which is a continuing survey of the knowledge and skills of U.S. students; and collection of longitudinal data on student progress, including information about course enrollments, financial aid, and the transition from high school to college.

The Office of Research supports university-based education research and development centers, research grants, and field-initiated research.

Most of the resources of the programs for the improvement of practice unit are directed to the regional educational laboratories, which help meet educational needs in particular regions through applied research, dissemination, and technical assistance. Other unit activities include synthesizing research results in publications for teachers, parents, and school administrators.

The information services unit supports the Education Resources Information Center [ERIC] system, which collects, abstracts, and disseminates information on education. The unit also manages the Department's library and issues numerous publications.

National Center for Education Statistics

The Committee has included bill language to provide $20,000,000 for the programs of the National Center for Education Statistics, as authorized under section 406 of the General Education Provisions Act, and as amended by the Hawkins-Stafford Education Act, Public Law 100–297, and an additional $9,500,000 for the National Assessment of Educational Progress.

Research

Of the amount provided for educational research and statistics, the Committee recommends $44,960,000 for research, as authorized under section 405 of the General Education Provisions Act. The Committee has included bill language earmarking $4,000,000 of this amount to complete funding of the rural schools initiative that has been conducted during the past 2 years by the nine regional educational laboratories.

This third and final year of funding will permit the laboratories to disseminate promising practices that they have identified and replicated during the first 2 years of the rural initiative. This $4,000,000 is in addition to the funding the laboratories receive through their existing contracts with the Department.

The Committee has also provided $4,000,000 within the "Compensatory education for the disadvantaged" account for the new Rural Educational Opportunities Program authorized by the Hawkins-Stafford Education Act, Public Law 100-297. This new program is intended to eventually supersede the rural initiative funded through the "Educational research and statistics" account.

The Committee is concerned that the performance evaluation of teachers is a research area that is being neglected in the administration budget request. The Department is encouraged to consider substituting a research center on teacher performance evaluation for the planned center on the teaching of civics and citizenship.

The Committee has seen several studies that may raise questions about the validity of existing data on postsecondary persistence rates among Asian students. One study conducted at Tufts University indicated that the persistence rates of a group of Asian students were lower than those of a group of non-Asian peers who were matched for socioeconomic status and academic ability. The Committee requests the Department to look further at this issue, and to report to the Committee its findings as to whether the questions raised about the persistence rates of Asian students merit additional study.

LIBRARIES

1988 comparable appropriation	$135,089,000
1989 appropriation request	76,000,000
House allowance	142,644,000
Committee recommendation	135,089,000

The Committee recommends an appropriation of $135,089,000 for libraries in fiscal year 1989, the same as the fiscal year 1988 level and $7,555,000 less than the House. It is $59,089,000 above the administration request.

Federal library funds provide grants to States to improve and extend library services, including adult literacy programs in public libraries. The Federal appropriation also supports resource sharing efforts among libraries, programs for personnel training, and support for research libraries.

The administration proposes legislation to replace the existing programs within the "Libraries" account with three new programs—services to the disadvantaged, resource sharing, and research and assessment—to be funded at $45,000,000, $30,000,000, and $1,000,000, respectively. The Committee provides the "Libraries" appropriation according to the current program structure since the administration's legislative proposal has not been enacted.

Public library services

The Committee has provided $78,986,000 for public library services, the same as the 1988 appropriation and $6,014,000 below the House allowance. States receive population-based formula grants to assist in extending and improving public library services. Grants are also used to make library services more accessible to persons who, because of barriers such as age, residence, or physical handicap, have not had access to adequate library services. State and local matching requirements range from 33 to 66 percent of total project costs.

Public library construction

The Committee recommends $22,595,000 for public library construction, the same as both the 1988 appropriation and the House allowance. Under this program, States receive grants based on population for new public library construction, as well as for modification of existing library facilities. Projects to remove architectural barriers and to reduce energy consumption are also permitted. State and local matching requirements range from 50 to 66 percent.

Interlibrary cooperation

The Committee provides $18,669,000 for interlibrary cooperation, which is the same as the 1988 appropriation and $1,331,000 below the House allowance. States receive formula grants based on population to stimulate interlibrary cooperation and resource sharing among all types of libraries: school, academic, public, and other special libraries. Grants fund projects such as linking libraries to data bases through telecommunication systems, resource sharing projects not linked to automation, and training of library personnel to handle recent technological advances. The Committee believes that interlibrary cooperation is a cost-effective way to meet libraries' acquisition needs and may, in the long run, reduce the need for Federal support of public library services and construction.

Library literacy programs

The Committee recommends an appropriation of $4,787,000 for library literacy programs, the same as both the 1988 appropriation and the House allowance. Under this program, grants are awarded to State library administrative agencies and local public libraries to promote adult literacy training in public libraries; 240 projects could be supported by the Committee-recommended funding level.

Training and demonstrations

The Committee has provided $718,000 for library career training and for research and demonstrations, which is the same as both the 1988 appropriation and the House allowance. This program supports grants to institutions of higher education and library organizations to train or retrain individuals for service in all types of libraries. Funds are also used for research and demonstrations leading to improved library services and for data collections and surveys.

Research libraries

The Committee recommends an appropriation of $5,744,000 for research libraries, the same as both the 1988 appropriation and the House allowance. Grants are awarded to assist major research libraries, both public and private, in maintaining, preserving, and strengthening their collections. Funds may be used to acquire research materials, preserve collections, increase access to research materials, and promote interinstitutional activities; 45 research libraries could be assisted with the funding provided by the Committee.

College library technology and cooperation grants

The Committee provides $3,590,000 for college library technology and cooperation grants, which is $210,000 less than the House allowance and the same as the 1988 appropriation. Discretionary grants are awarded to institutions of higher education for: equipment necessary to participate in networks for sharing of library resources; assistance in establishing and strengthening joint use library facilities; and research and demonstration projects in utilizing technology. Institutions must match 33 percent of their grant with non-Federal funds. About 90 grants could be awarded from the funding provided by the Committee.

SPECIAL INSTITUTIONS

AMERICAN PRINTING HOUSE FOR THE BLIND

1988 comparable appropriation	$5,266,000
1989 appropriation request	5,381,000
House allowance	5,381,000
Committee recommendation	5,400,000

The Committee recommends an appropriation of $5,400,000 for the American Printing House for the Blind [APHB]. This is $19,000 more than both the administration request and the House allowance. It is $134,000 above the fiscal year 1988 appropriation.

This appropriation helps support the American Printing House for the Blind, which provides educational materials to legally blind students below the college level. The Federal subsidy provides about 40 percent of APHB's operating expenditures. Materials are distributed free of charge to schools and States through per capita allotments based on the total number of blind students. Materials provided include textbooks and other educational aids in braille, large type, and recorded form and microcomputer applications.

The Committee recommendation assumes APHB will continue to receive an additional $10,000 in interest payments from an 1879 trust fund. Although the administration proposed legislation to terminate the trust fund, it has not been enacted.

NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

1988 comparable appropriation	$31,594,000
1989 appropriation request	33,031,000
House allowance	33,231,000
Committee recommendation	33,031,000

The Committee recommends an appropriation of $33,031,000 for the National Technical Institute for the Deaf. This is the same as the administration request, $200,000 below the House allowance, and $1,437,000 above the fiscal year 1988 appropriation.

The Department contracts with the National Technical Institute for the Deaf [NTID], located on the campus of the Rochester Institute of Technology, to provide a residential facility for postsecondary technical training and education for the deaf. NTID also provides support services for deaf students, trains professionals in the field of deafness, and conducts applied research. This appropriation comprises about 83 percent of NTID's budget.

Of the $33,031,000 recommended by the Committee, $32,831,000 is designated for operations and $200,000 is provided for the NTID endowment matching fund. This would provide an increase of $1,428,000 over 1988 for NTID operations, and a $9,000 increase over the amount provided for the endowment fund in 1988. The Committee believes that the endowment matching fund is an important mechanism for generating additional private assistance for NTID and lessening its dependence on Federal funding. The Committee urges NTID to invest the necessary institutional resources to establish an effective development office.

The Committee continues to be concerned by reports that NTID wishes to admit foreign students at tuition rates that do not cover the full educational cost per student. The Committee has again included bill language prohibiting the use of any of the Federal funds provided in this account to subsidize the tuition of foreign students.

GALLAUDET UNIVERSITY

1988 comparable appropriation	$62,195,000
1989 appropriation request	63,463,000
House allowance	66,800,000
Committee recommendation	65,000,000

The Committee recommends an appropriation of $65,000,000 for Gallaudet University. This is $1,537,000 more than the administration request, $1,800,000 less than the House allowance, and $2,805,000 above the fiscal year 1988 appropriation.

The university is a private, nonprofit institution offering college preparatory, undergraduate, and continuing education programs for the deaf, as well as graduate programs in fields related to deafness for hearing impaired and hearing students. The university conducts basic and applied research related to hearing impairment, and provides public service programs for the deaf.

Funds for Gallaudet also support the Model Secondary School for the Deaf and Kendall Demonstration Elementary School. The Model Secondary School for the Deaf serves as a laboratory for educational experimentation and development, disseminates models of instruction for the deaf, and prepares deaf adolescents for postsecondary academic or vocational education. The Kendall Demonstration Elementary School develops and provides instruction for children from infancy through age 15.

University programs are about 74 percent federally financed, while the appropriation provides 100 percent of the funding for the Kendall and Model Secondary Schools.

Of the $65,000,000 recommended by the Committee, $1,000,000 is provided for the Gallaudet University endowment matching fund. The Committee believes that the endowment is an important means of generating more private assistance for Gallaudet and lessening its dependence on Federal funding. The amount of $44,429,000 is provided for college program operations, with $12,603,000 and $6,968,000 designated for the Model Secondary School for the Deaf and Kendall Demonstration Elementary School, respectively.

The Committee intends that the $2,378,000 increase over the 1988 college program operations funding level be used to help finance faculty salary increases, the establishment of a new doctoral program in psychology and a master's degree program in social work, and the training of interpreters.

The Committee is pleased to learn that the university plans to reexamine its policy of subsidizing the tuition of foreign students. A report submitted by Gallaudet University to the Committee indicates that about 10 percent of its student body is comprised of foreign students, more than one-half of whom come to the university from Canada. The tuition these students are charged covers only about 18 percent of the average educational cost per student. The Committee questions the appropriateness of subsidizing foreign students when these Federal dollars could instead be used for such purposes as faculty salary increases.

HOWARD UNIVERSITY

1988 comparable appropriation	$172,203,000
1989 appropriation request	176,147,000
House allowance	181,147,000
Committee recommendation	176,147,000

The Committee recommends an appropriation of $176,147,000 for Howard University, an increase of $3,944,000 from the fiscal year 1988 amount and the same as the budget request. This amount is $5,000,000 less than the House allowance.

Howard University offers undergraduate, graduate, and professional degrees through the 18 schools and colleges which comprise the university. The university also administers the Howard University Hospital, which provides both inpatient and outpatient care, as well as training in the health professions. Federal funds from this account support about 69 percent of the university's educational and general costs, excluding the hospital. In addition, Howard University students receive $15,100,000 in Federal student aid, and the university receives another $13,400,000 through research and other Federal grant programs.

Of the total amount recommended, the Committee provides $148,696,000 for Howard's academic program, $4,787,000 for research, and $21,164,000 for the Howard University Hospital. For the endowment fund, $1,500,000 is provided, in accordance with Howard University's general authorizing legislation. The university is estimated to be able to match this amount of endowment funding in 1989, although bill language has been included to make these funds available until expended. The Committee rejects the administration's proposal to reappropriate $500,000 from the amount provided for the academic program in 1988 to the endowment fund, and expects $146,252,000 to be allocated for the academic program in 1988.

The Committee expects the $2,444,000 increase in academic program funding over the 1988 level to be used for pressing needs identified by the university, such as additional resources for the law school. The Committee understands that Howard has $45,000,000 in unused bond issuing authority from the District of Columbia and requests a report from the university identifying how it plans to use this authority to address some of its facility construction needs.

The university indicates that the accreditation of one of its graduate schools is endangered by a shortage of funds. The Committee affirms its commitment to Howard University and applauds the many contributions of its graduate schools. However, the Committee would not serve Howard well if it ignored evidence of serious academic and administrative problems affecting some of the graduate schools and their relationship with the university. The Committee will look forward to learning that the university is assuring the excellence and integrity of its programs.

The Committee is pleased to learn that the Department plans to study the issue of federally subsidizing foreign students who attend Howard and to present its recommendations in the fiscal year 1990 budget. The Committee understands that foreign students make up about 17 percent of the Howard student body.

DEPARTMENTAL MANAGEMENT

PROGRAM ADMINISTRATION

1988 comparable appropriation	$241,028,000
1989 appropriation request	249,849,000
House allowance	249,849,000
Committee recommendation	260,600,000

The Committee recommends an appropriation of $260,600,000 for program administration. This is $10,751,000 more than the administration request and the House allowance, and $19,572,000 more than the fiscal year 1988 appropriation. The administration also requests $5,600,000 proposed for later transmittal associated with the national student loan data system.

These funds are used to administer the Department's many education programs. Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, automated data processing, and other services. Support for program and management evaluation and advisory councils is also provided under this activity.

The Committee concurs with the Department's request for $5,600,000 to implement the national student loan data system. Bill language has been included to earmark $5,600,000 for this purpose, contingent upon the removal of the statutory prohibition against the mandatory use of the data system to verify or obtain information before lenders, guaranty agencies, or schools can make, guarantee, or certify a student loan, as well as other provisions that prevent the system from being cost effective. The Department estimates that use of the system to enforce loan limits and avoid providing new loans to defaulters could save taxpayers millions of dollars annually in erroneously awarded student assistance.

The Committee believes that, in conjunction with its other activities to improve the integrity of the student loan program, the Department should restore its earlier level of effort in the area of program monitoring and technical assistance. Consequently, the Committee's recommendation includes $5,200,000 above the administration request to increase the number of student aid program reviews conducted by Department staff. The additional funding would support 1,977 on-site program reviews, the same number as were conducted in 1981, and 961 more reviews than could be funded under the administration's 1989 request. This additional funding would finance travel costs, overhead, and an increase of 90 FTE above the 3,299 FTE requested by the administration. These additional reviews would be conducted at postsecondary institutions, lenders and guaranty agencies. Bill language has been included to earmark the $5,200,000 for program reviews so that the funding cannot be diverted for other purposes.

OFFICE FOR CIVIL RIGHTS

1988 comparable appropriation	$40,530,000
1989 appropriation request	41,341,000
House allowance	41,341,000
Committee recommendation	41,341,000

The Committee recommends an appropriation of $41,341,000 for the Office for Civil Rights [OCR]. This is the same as the administration request and the House allowance, and $811,000 more than the fiscal year 1988 appropriation. The recommended level would support 820 FTE.

The Office for Civil Rights is responsible for the enforcement of laws that prohibit discrimination on the basis of race, color, national origin, sex, handicap, and age in all programs and institutions funded by the Department of Education. To carry out this function, the OCR investigates and resolves discrimination complaints; monitors desegregation and equal educational opportunity plans; reviews possible discriminatory practices by recipients of education funds; and provides technical assistance to funding recipients to help them meet civil rights requirements.

The Committee understands that OCR may face a significant increase in its workload as a result of the reopening of cases due to the passage of the Civil Rights Restoration Act and new responsibilities relating to the clearance of applications for the magnet schools program. The Committee expects to be notified of any additional resource requirements OCR may have once they are identified.

OFFICE OF THE INSPECTOR GENERAL

1988 comparable appropriation	$17,560,000
1989 appropriation request	17,911,000
House allowance	17,911,000
Committee recommendation	18,400,000

The Committee recommends an appropriation of $18,400,000 for the Office of the Inspector General. This is $489,000 more than both the administration request and the House allowance, and $840,000 more than the fiscal year 1988 appropriation. It would support 320 FTE.

The Office of the Inspector General has the authority to investigate all departmental programs and administrative activities, including those under contract or grant, to prevent and detect fraud and abuse, and to ensure the quality and integrity of those programs. The Office is responsible for the audit, investigative, and security functions of the Department.

The Committee is pleased that the Office of the Inspector General plans to give increased attention to investigations of proprietary schools. The Committee provides an increase above the administration request to ensure that the Office has sufficient resources to conduct these investigations and perform its other audit and review functions.

TITLE IV—RELATED AGENCIES

ACTION

OPERATING EXPENSES

1988 comparable appropriation	$163,085,000
1989 appropriation request	165,991,000
House allowance	168,863,000
Committee recommendation	171,897,000

The Committee recommends an appropriation of $171,897,000 for ACTION. The amount recommended is $8,812,000 more than the fiscal year 1988 appropriation, $5,906,000 more than the administration request, and $3,034,000 more than the House allowance.

VISTA

The Committee provides $21,910,000 for the Volunteers in Service to America [VISTA] Program. This is the same as the administration request and $2,082,000 more than the fiscal year 1988 appropriation. The Committee recommendation is the same as the House allowance.

This funding level will provide for 2,600 volunteer service years as authorized in Public Law 99–551. The Committee directs ACTION to continue to recruit, train, and place volunteers evenly throughout the fiscal year. The Committee, again, wishes to highlight the importance of recruiting recent college graduates as VISTA volunteers. ACTION shall report to the Committee on a biannual basis on its progress toward meeting the recruitment goals articulated in the current year operating plans for fiscal year 1988 and fiscal year 1989. The Committee expects ACTION to continue its efforts in promoting the student loan deferment opportunities available to VISTA volunteers authorized under sections 428(b)(1)(M) and 464(c)(2)(A) of the Higher Education Act of 1965, as amended. The Committee further expects that all recruitment materials and information provided to potential VISTA volunteers will promote the availability of these loan deferment opportunities.

VISTA Literacy Corps

The Committee has included $2,872,000 for the VISTA Literacy Corps activities authorized under section 109(c) of Public Law 99–551. The Committee recommendation is the same as the fiscal year 1988 comparable appropriation and the House allowance.

This level of funding is intended to support 335 volunteer service years in fiscal year 1989. The Director shall continue to place section 109 volunteers evenly throughout the fiscal year and, wherever possible, through standard VISTA placement procedures. It continues to be the

Committee's intention that VISTA Literacy Corps volunteers serve as mobilizers and catalysts in recruiting and training community volunteers and in providing public education and awareness of literacy programs, rather than serve as providers of 1-on-1 tutoring. As in previous years, Literacy Corps funds for fiscal year 1989 shall be used to supplement and not supplant the average level of volunteer service years provided under part A for literacy projects in fiscal year 1988.

Service learning programs

The Committee recommends an appropriation of $1,368,000 for the service learning programs. This is the same as the administration request and the House allowance and $58,000 more than the fiscal year 1988 comparable appropriation.

This program provides training and technical assistance for high school, college, and community agency staff who develop and manage student volunteer programs.

Citizen participation and volunteer demonstration programs

The Committee recommends $3,401,000 for citizen participation and volunteer demonstration programs as authorized under title I, part C of the Domestic Volunteer Services Act. This is $719,000 more than the fiscal year 1988 comparable appropriation and the same as the administration request. The House allowed $2,682,000. Of the amounts provided, the Committee intends that not less than $1,600,000 be used to support ACTION drug alliance activities. These activities seek to mobilize and initiate private sector efforts to increase voluntarism in preventing drug abuse through public awareness and education.

The Committee notes that the agencies budget submission for part C programs identify $120,000 for support costs for the ACTION Drug Alliance. Since the drug alliance activity in fiscal year 1989 will be conducted under the statutory authority for part C rather than the Omnibus Drug Act of 1986, the agency is not authorized to use funds provided for part C for administrative support costs. The Committee, therefore, expects the full $1,600,000,000 provided for the drug alliance to be used for the other initiatives identified under budget activity 2C.

Older American volunteer programs

The Committee provides $116,321,000 for the older American volunteer programs. This is $5,119,000 more than the fiscal year 1988 appropriation, and $3,321,000 more than the administration request. The House allowed $114,719,000. The Committee recommendation includes $60,246,000 for the Foster Grandparents Program. This is $2,802,000 more than the fiscal year 1988 appropriation. This program enables low-income senior citizens to provide supportive, person-to-person services to children with special needs. Volunteers serve 20 hours a week providing care and attention on a 1-to-1 basis to needy children.

The Committee provides $31,237,000 for the Retired Senior Volunteer Program [RSVP]. This is $600,000 more than the fiscal year 1988 appropriation and the same as the administration request. This program provides persons age 60 and over with the opportunity for volunteer service in their own community. Volunteers participate in youth counseling, literacy enhancement, crime prevention, the delivery of health care services, and other areas.

For the Senior Companion Program, the Committee has provided $24,838,000. This is $1,717,000 more than the fiscal year 1988 appropriation and the administration request. This program enables low-income senior citizens to provide personal assistance and companionship primarily to older adults. Senior companions assist other senior citizens who have physical, mental or emotional impairments, and who are chronically homebound and at risk of institutionalization. Low-income seniors receive a small stipend for their voluntary service.

The Committee directs that increased funds for this program be used to fully fund the new senior companion projects begun in fiscal year 1988.

Program support

The Committee provides $26,025,000 for program support. This is $287,000 less than the administration request but $713,000 more than the House allowance and the authorized ceiling for this activity as stipulated in section 504 of the Domestic Volunteer Services Act, as amended. This increase should enable the ACTION agency to meet critical staffing needs necessary for program administration. The Committee expects the Director to continue to give the highest priority in allocating staffing resources to vacancies in the State and regional offices. The Committee further expects ACTION to devote travel expenditures to the greatest degree possible toward program site visits.

CORPORATION FOR PUBLIC BROADCASTING

1990 comparable appropriation	$232,648,000
1991 appropriation request	214,000,000
House allowance	Defer
Committee recommendation	302,500,000

The Committee recommends an appropriation of $302,500,000 for the Corporation for Public Broadcasting. These funds are an advance appropriation for fiscal year 1991. The House deferred action on funding for the Corporation pending the enactment of authorizing legislation. The Corporation for Public Broadcasting is the primary vehicle for providing Federal financial assistance to the radio and television stations which currently compose the noncommercial broadcasting system.

Programming and system support

The Committee has provided $245,000,000 for the Corporation's programming and system support activities. This is $12,352,000 more than the fiscal year 1990 comparable appropriation of $232,648,000. The administration requested that $214,000,000 be provided for this activity by reappropriating $32,600,000 from funds already appropriated for fiscal year 1989 and fiscal year 1990 and combining them with $181,352,000 in new fiscal year 1991 obligations.

Funds provided to the Corporation for programming and system support are distributed to the Nation's public television and radio stations in the form of community service grants. Funds are also used by the Corporation for the development of new programming for national distribution. Amounts allocated to each activity are determined by formula as stipulated in the Corporation's enacting statute.

The Committee wishes to express its strong support for the Corporation's activities in the area of outreach programming and hopes that the Corporation will see fit to expand its efforts in this area.

Satellite interconnection fund

The Committee provides $57,500,000 for the public broadcasting satellite interconnection fund for the purpose of ensuring the continued provision of high quality interconnection services currently offered by public broadcasting stations. Authorizing legislation for this activity is currently pending in identical form in the House of Representatives and the Senate under H.R. 4118 and S. 2114, respectively. Funds must be expended for costs associated with the replacement, refurbishment, upgrading, and maintenance of the public television and radio satellite interconnection system. None of the funds provided shall be available prior to fiscal year 1991 and such funds shall remain available until expended.

The space-based components of the current interconnection system are expected to fall out of service during calendar year 1991. In order for the system to remain operational without interruption, new space assets will be required to be in place in 1991, while public radio and television ground systems will be required to be upgraded over a 3-year period beginning in 1991. In order that the above-mentioned needs are addressed simultaneously without an interruption in service, the Committee, in consultation with the Office of Technology Assessment, has developed a spending plan based on budget materials submitted by the Corporation for Public Broadcasting [CPB], the Public Broadcasting Service [PBS], and National Public Radio [NPR].

The Committee provides $33,500,000 for the purpose of rebuilding 60 percent of the public radio ground system and 50 percent of the public television ground system. This amount will include necessary supplemental management costs to be incurred by PBS and NPR in the development and execution of the replacement of the interconnection system. However, these costs may not exceed 15 percent of the amounts provided to each entity.

The Committee further provides $24,000,000 for the replacement of the space segment to provide the public radio and television authorities the necessary upfront investment capital required to negotiate the purchase of the needed future space segment. Should fiscal year 1991 requirements associated with the space component exceed the amount provided, the Committee will readjust the distribution of funds within the total provided for fiscal year 1991 in later action.

Subject to the availability of additional resources, the Committee intends to provide funding for the total cost of the public broadcasting satellite interconnection system in making appropriations for fiscal years 1992 and 1993. The Committee identifies an additional $32,000,000 to be necessary to fully upgrade the ground-based interconnection equipment for the public television and radio networks.

The Committee expects to provide additional sums for the lease option or outright purchase of the required space segment. The Committee will monitor the progress of the public broadcasting authorities in negotiating for the replacement of the space segment and determine additional appropriations requirements based on this process. The Committee, therefore, directs the Corporation or its designee to provide the Committee with semiannual reports on expenditures and its negotiating status with vendors selected to provide the necessary space-based and ground-based hardware required for the system to be fully modernized and operational in fiscal year 1993.

FEDERAL MEDIATION AND CONCILIATION SERVICE

1988 comparable appropriation	$24,510,000
1989 appropriation request	24,937,000
House allowance	26,127,000
Committee recommendation	24,937,000

The Committee recommends an appropriation of $24,937,000 for the Federal Mediation and Conciliation Service. This is the same as the administration request, $1,190,000 less than the House allowance, and $427,000 more than the fiscal year 1988 appropriation.

The Federal Mediation and Conciliation Service prevents and minimizes work stoppages by making available skilled professional mediators. Activities include education and training to support free collective bargaining, technical assistance to promote development of sound labor-management relationships and practices, and provision of a roster of qualified arbitrators to assist the parties to a collective bargaining agreement in the resolution of grievances.

The Committee recommendation will support 335 full-time equivalent [FTE] positions, an increase of 9 positions over last year.

FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

1988 comparable appropriation	$3,906,000
1989 appropriation request	4,079,000
House allowance	4,079,000
Committee recommendation	4,079,000

The Committee recommends an appropriation of $4,079,000 for the Federal Mine Safety and Health Review Commission, the same as the administration request and the House allowance, and $173,000 more than the fiscal year 1988 appropriation of $3,906,000.

The Commission adjudicates disputes between the Labor Department's Mine Safety and Health Administration and employers or employees to whom MSHA has issued a citation charging a violation.

The Committee expects that the Mine Safety Commission will conduct its activities in strict compliance with the Government in the

Sunshine Act. The Commission will close its meetings and/or hearings to the public only when absolutely necessary and in accordance with the statutory exceptions stipulated in the Sunshine Act.

NATIONAL COMMISSION ON CHILDREN

1988 comparable appropriation	
1989 appropriation request	
House allowance	
Committee recommendation	$800,000

The Committee recommends an appropriation of $800,000 for the National Commission on Children. There was no administration request or House allowance for this program.

The Commission was established by section 9136 of the Omnibus Reconciliation Act of 1987, Public Law 100–203. The 36 member Commission will study and make recommendations to Congress and to the President regarding five subjects: health of children, social and support services for children and their parents, education, income security, and tax policy.

The Commission will submit two reports: an interim report by September 30, 1988, and a final report by March 31, 1989.

NATIONAL COMMISSION ON LIBRARIES AND INFORMATION SCIENCE

1988 comparable appropriation	$718,000
1989 appropriation request	755,000
House allowance	750,000
Committee recommendation	750,000

The Committee recommends an appropriation of $750,000 for the National Commission on Libraries and Information Science [NCLIS], $32,000 more than the fiscal year 1988 comparable level. This is the same as the House allowance and the authorized ceiling for the Commission. The administration's request stands $5,000 above the authorized ceiling.

This Commission has the responsibility for advising the President and Congress on the development and implementation of national policy in the library and information field, developing overall plans for meeting national library and information needs, and coordinating activities at the Federal, State, and local levels in meeting those needs.

NATIONAL COMMISSION ON MIGRANT EDUCATION

1988 comparable appropriation	
1989 appropriation request	$1,000,000
House allowance	2,000,000
Committee recommendation	1,000,000

The Committee provides $1,000,000 for the National Commission on Migrant Education as authorized under section 1439 of the Hawkins-Stafford Elementary and Secondary School Improvement Amendments of 1988. This amount is the same as the administration request. The House provided $2,000,000.

The Commission shall have 12 members, 4 of whom shall be appointed by the President, 4 of whom shall appointed by the Speaker of the House, and 4 of whom shall be appointed by the President pro tempore of the Senate. The Commission shall study a variety of issues concerning the education of migrant youth and adults including the degree of coordination between Federal programs serving migrant students, the degree to which these programs meet the needs of the entire migrant population, and the need for program enhancements to better serve this at-risk population.

NATIONAL COMMISSION TO PREVENT INFANT MORTALITY

1988 comparable appropriation	....
1989 appropriation request	....
House allowance	....
Committee recommendation	$500,000

The Committee recommends an appropriation of $500,000 for the National Commission to Prevent Infant Mortality. There was no administration request or House allowance for this program.

The Commission was created by Public Law 99–660 to make recommendations to the Congress on a national policy design to reduce and prevent infant mortality. Bill language has been included to increase the Commission membership from 6 to 7 at large members, for a total membership of 16.

NATIONAL COUNCIL ON THE HANDICAPPED

1988 comparable appropriation	$892,000
1989 appropriation request	974,000
House allowance	974,000
Committee recommendation	1,174,000

The Committee recommends $1,174,000 for the National Council on the Handicapped. This is $200,000 more than the administration's budget request and the House allowance, and $282,000 more than the fiscal year 1988 appropriation of $892,000.

The National Council on the Handicapped was created to establish general policies regarding Federal activities affecting handicapped individuals and to review rehabilitation services and handicapped research.

Thirteen years have passed since the enactment of Public Law 94–142 and progress has been made in the education of children with disabilities. However, the National Council on the Handicapped reports "Toward Independence" and "On the Threshold of Independence" highlight several of the Council's concerns about the education of this population. In order to independently address these concerns the Committee has appropriated an additional $200,000 to the National Council on the Handicapped to begin studying priority issues related to the education of children with disabilities.

NATIONAL LABOR RELATIONS BOARD

1988 comparable appropriation	$133,097,000
1989 appropriation request	138,647,000
House allowance	138,647,000
Committee recommendation	138,647,000

The Committee recommends an appropriation of $138,647,000 for the National Labor Relations Board. This is the same as the administration request, the same as the House allowance, and $5,550,000 more than the fiscal year 1988 appropriation of $133,647,000. The Board executes its responsibilities under the National Labor Relations Act by resolving representation disputes in industry and preventing unfair labor practices on the part of labor unions and/or employers.

The Committee expects that the Board will conduct its activities in strict compliance with the Government in the Sunshine Act. The Board will close its meetings and/or hearings to the public only when absolutely necessary and in accordance with the statutory exceptions stipulated in the Sunshine Act.

NATIONAL MEDIATION BOARD

1988 comparable appropriation	$7,004,000
1989 appropriation request	6,551,000
House allowance	6,551,000
Committee recommendation	6,551,000

The Committee recommends an appropriation of $6,551,000 for the National Mediation Board. This is $453,000 less than the fiscal year 1988 appropriation, and the same as the administration request and the House allowance. The National Mediation Board handles labor-management disputes, and questions of representation in the railroad and airline industries.

The bill includes $1,800,000 for adjustment of railroad grievances, a decrease of $498,000 below the 1988 level. It is anticipated by the Board that less funds will be needed in 1989 because of the results of the railroad labor-management committee's continuing efforts to improve the system. Increases are provided for costs associated with such things as personnel compensation and benefits, travel, communications, rental of office space, printing, equipment, court reporting services, and ADP time-sharing services.

OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

1988 comparable appropriation	$5,885,000
1989 appropriation request	6,002,000
House allowance	6,002,000
Committee recommendation	5,831,000

The Committee recommends an appropriation of $5,831,000 for the Occupational Safety and Health Review Commission. This is $171,000 less than the administration request and the House allowance and $54,000 less than the fiscal year 1988 appropriation of $5,885,000.

The Review Commission is charged with ruling on cases forwarded to it by the Department of Labor when disagreements arise over the results of safety and health inspections performed by the Occupational Safety and Health Administration [OSHA]. Employers have the right to dispute any alleged job safety or health violation found during the inspection by OSHA, the penalties proposed by OSHA, and time given by OSHA to correct any hazardous situation. Employees and representatives of employees may initiate a case by challenging the propriety of the time OSHA has allowed for correction of any violative condition.

The Review Commission has been without the necessary quorum of two sitting Commissioners since April 1987. As a result, the Commission has been inoperative at the review level and unable to dispose of the backlog of cases that have been directed for review. Nominations to fill the two vacancies on the Commission have been pending in the Senate since January 1986 and May 1987. The Committee views the lack of action on these nominations as indicative that the Commission will continue to be inoperative at the review level through much of fiscal year 1989. The Committee has provided funding below the administration request since the request assumes fully operative review activities throughout fiscal year 1989.

PHYSICIAN PAYMENT REVIEW COMMISSION

1988 comparable appropriation	$2,997,000
1989 appropriation request	3,059,000
House allowance	3,059,000
Committee recommendation	3,059,000

The Committee provides the authority to transfer $3,059,000 from the Federal supplementary medical insurance trust fund to support the activities of the Physician Payment Review Commission [PPRC]. This is the same as the Commission's independent request to the Congress and the House allowance, $62,000 more than the fiscal year 1988 appropriation.

The Physician Payment Review Commission was established by section 9305 of the Consolidated Omnibus Reconciliation Act of 1985 (Public Law 99–272). The Commission makes recommendations to the Congress by March 1 of each year regarding adjustments to the reasonable charge levels for Medicare-related physicians' services and changes in the methods for determining the rates of payment, and for making payment, for such services. This includes advising Congress on issues surrounding the discrepancy among reimbursement rates based on geographic location. The Commission also advises and makes recommendations to the Secretary of Health and Human Services regarding a relative value scale.

The appropriation will support the work of the 13 commissioners, an executive director, and a staff of not more than 25. The amount approved includes $606,000 for policy analysis and data development.

PROSPECTIVE PAYMENT ASSESSMENT COMMISSION

1988 comparable appropriation	$3,592,000
1989 appropriation request	3,664,000
House allowance	3,664,000
Committee recommendation	3,664,000

The Committee recommends the transfer of $3,664,000 from the Medicare trust funds for the operation of the Prospective Payment Assessment Commission [ProPAC]. This is the same as the Commission's independent request to the Congress and the House allowance, and $72,000 more than the fiscal year 1988 appropriation.

The Commission was established by the Social Security Amendments of 1983 (Public Law 98-21), which enacted the Medicare Prospective Payment System [PPS]. ProPAC acts as an advisory body to the Secretary of Health and Human Services and the Congress, providing recommendations and reports on the functioning of the Prospective Payment System and adjustments needed in the system to assure that it is maintained and kept up to date. ProPAC is a permanent, independent body with 17 commissioners appointed by the Director of the congressional Office of Technology Assessment.

This amount of funding will provide for the ongoing work of the Commission, which includes the development and maintenance of a strong data and policy analysis capability, the development and submission of three annual reports, and the provision of continuing oversight of the Prospective Payment System. The amount provided includes $1,175,000 for data development, analysis, and research.

RAILROAD RETIREMENT BOARD

DUAL BENEFITS PAYMENTS ACCOUNT

1988 comparable appropriation	$352,323,000
1989 appropriation request	336,185,000
House allowance	355,000,000
Committee recommendation	[1] 355,000,000

[1] Includes $28,000,000 in tax receipts.

The Committee has provided a total of $355,000,000 for the "Dual benefits payments" account. The Committee recommends an appropriation of $327,000,000. In addition, the Committee has included bill language to add $28,000,000 in income tax receipts on dual benefits, as authorized by law. This is $18,815,000 more than the administration request, the same as the House allowance, and is $2,677,000 more than fiscal year 1988 appropriation.

This appropriation provides for vested dual benefits authorized by the Railroad Retirement Act of 1974, as amended by the Omnibus Reconciliation Act of 1981. This separate account established for the payment of dual benefits is funded by general fund appropriations.

FEDERAL PAYMENTS TO THE RAILROAD RETIREMENT ACCOUNT

1988 comparable appropriation	$3,100,000
1989 appropriation request	3,100,000
House allowance	3,100,000
Committee recommendation	3,100,000

The Committee recommends an appropriation of $3,100,000 for the "Federal payments to the railroad retirement" account. This amount is the same as the administration request, the House allowance, and the fiscal year 1988 appropriation.

Section 417 of the Railroad Retirement Solvency Act of 1983 (Public Law 98–76) provides for monthly transfers from the Treasury of amounts represented by benefit checks drawn 6 months earlier and not presented for payment. Amounts for reimbursement of uncashed checks must be provided in advance, based on an estimate of required funds.

LIMITATION ON ADMINISTRATION

1988 comparable appropriation	$57,860,000
1989 appropriation request	58,012,000
House allowance	59,312,000
Committee recommendation	60,350,000

The Committee recommends a limitation of $60,350,000 for administration. This is $2,338,000 more than the administration request, $2,490,000 more than the fiscal year 1988 limitation, and $1,038,000 more than the House allowance. This account provides for a limitation of funds in the "Railroad retirement" account that may be used by the Railroad Retirement Board for administrative purposes.

The Committee recommendation provides for a total staffing level of 1,600 full-time equivalents [FTE's]. This is an increase of 43 positions over last year's staffing level. The Committee has rejected the administration's proposal to reduce the staffing level by 23 FTE positions.

The Committee has included bill language that specifies staffing levels of not less than 1,290 full-time equivalent employees for the Retirement/Survivor Benefit Program. The Committee provided $2,338,000 more than the budget request to cover personnel compensation and benefit costs.

The Committee is increasing the Railroad Retirement Board's FTE ceiling for the express purpose of helping the agency to: (1) reduce its backlogs in the retirement claims program due to mass adjustment operations, such as cost of living, earnings after retirement, and new retirement claim workloads resulting from findings by the General Accounting Office [GAO], or the Board's bureau of quality assurance; (2) increase its data processing staff to work on the automation activities that are being identified by the recently formed automation planning group, thereby performing an increased role in, and better managing of, these activities inhouse, rather than relying so heavily on contractors; and (3) continue to enhance its financial management activities, which have been improved during the past few years.

LIMITATION ON RAILROAD UNEMPLOYMENT INSURANCE ADMINISTRATION FUND

1988 comparable appropriation	$13,830,000
1989 appropriation request	13,678,000
House allowance	13,678,000
Committee recommendation	13,950,000

The Committee recommends a limitation of $13,950,000 for the limitation on administration of the railroad unemployment insurance fund. This is $272,000 more than the administration request and the House allowance, and $120,000 more than the fiscal year 1988 appropriation.

The Committee has included bill language that specifies staffing levels of not less than 310 full-time equivalent positions for the Railroad Unemployment/Sickness Insurance Program. The Committee has rejected the administration's proposal to delete the staffing levels, and has included appropriation bill language which apportions sufficient funds to support the administration of this program.

LIMITATION ON REVIEW ACTIVITY

1988 comparable appropriation	$2,212,000
1989 appropriation request	5,200,000
House allowance	2,700,000
Committee recommendation	3,500,000

The Committee recommends $3,500,000 for the Office of the Inspector General. This is $1,700,000 less than the administration request, $800,000 more than the House allowance, and $1,288,000 more than the fiscal year 1988 limitation.

The Office of the Inspector General conducts audits, investigations, and review activities. This amount is to be derived from the railroad retirement and railroad unemployment insurance trust funds. The Committee recommendation provides funds to support salary and benefits for 60 full-time equivalent [FTE] positions. This is an increase of 15 positions from last year's level of 45 positions. The recommendation also provides funds for contracts and other services; equipment and supplies; and travel costs, which are primarily associated with establishing a nationwide investigation program.

SOLDIERS' AND AIRMEN'S HOME

OPERATION AND MAINTENANCE

1988 comparable appropriation	$35,879,000
1989 appropriation request	36,643,000
House allowance	37,657,000
Committee recommendation	37,700,000

The Committee recommends authority to expend $37,700,000 from the Soldiers' and Airmen's Home permanent fund. This is $1,057,000 more than the administration request, $1,821,000 more than the fiscal year 1988 appropriation of $35,879,000, and $43,000 more than the House allowance.

The U.S. Soldiers' and Airmen's Home is a retirement facility that provides residence, subsistence, medical, and other care to eligible

Army and Air Force veterans. The facility, which is currently serving about 2,100 residents, is funded by annual appropriations made by Congress from a trust fund on deposit with the U.S. Treasury. Income to the fund is received from members' fees, interest, withheld pay, and nonjudicial fines imposed on active duty soldiers and airmen.

CAPITAL OUTLAY

1988 comparable appropriation	$15,445,000
1989 appropriation request	13,215,000
House allowance	15,000,000
Committee recommendation	15,000,000

The Committee recommends authority to expend $15,000,000 from the Soldiers' and Airmen's Home permanent fund. This amount is $1,785,000 more than the administration request and 445,000 less than the fiscal year 1988 appropriation.

This appropriation, in combination with funds provided in fiscal year 1988, is intended to finance the construction of a 200-bed intermediate care facility. The Committee has recognized the construction of this facility to be a long-standing need at the home, as have the Surgeon General of the U.S. Army, the Army's Chief of Engineers, the home's Board of Commissioners and the Secretaries of the Army and Air Force. This facility will enable the home to provide necessary care in an appropriate setting for those residents that require medical attention but do not require hospitalization. With the design, procurement and construction phases of the project now fully financed, the Committee directs that the home commence construction of the facility without further administrative review or delay. The Committee also expects the necessary renovation activities for the home's dormitories and other facilities to continue with funds already provided as called for in the Board of Commissioner's renovation plan for the home.

U.S. BIPARTISAN COMMISSION ON COMPREHENSIVE HEALTH CARE

1988 comparable appropriation	
1989 appropriation request	
House allowance	
Committee recommendation	$1,046,000

The Committee recommends an appropriation of $1,046,000 for the U.S. Bipartisan Commission on Comprehensive Health Care. There was no administration request or House allowance for this program.

The Commission was established by the Medicare Catastrophic Coverage Act of 1988. The 15-member Commission will study and make recommendations to Congress regarding comprehensive long-term care services and comprehensive health care for the elderly and disabled, and comprehensive health care services for all individuals in the United States. The Commission will submit two reports: (1) a report on long-term care services for the elderly and disabled in 6 months, and (2) a report on comprehensive health care services for all Americans in 1 year. The Commission will terminate 30 days after the date it submits the report on comprehensive health care services.

The Committee supports the establishment of a bipartisan commission to define national health policy recommendations. The Committee fully recognizes the challenges presented by the Nation's health care needs and fiscal constraints and believes the complexity of this issue mandates a comprehensive approach. The Committee expects the Commission to report on all (but not limited to) the following issues: the essential health care services that should be available to all Americans; the ethical and legal basis for policy recommendations; the goals of the national health care policy and their rationale; the determination of the most effective and efficient roles for Government and the private sector in promoting and assuring access to quality health care; and the reduction of overall health care expenditures (based on a percentage of the gross national product [GNP] or an alternative method of measurement.

U.S. INSTITUTE OF PEACE

1988 comparable appropriation	$4,308,000
1989 appropriation request	3,376,000
House allowance	Defer
Committee recommendation	8,000,000

The Committee recommends an appropriation of $8,000,000 for the U.S. Institute of Peace. This is $4,624,000 more than the administration request and $3,692,000 more than the fiscal year 1988 appropriation. The House deferred action on the Peace Institute pending the enactment of reauthorization legislation.

The Institute was established by the United States Institute of Peace Act (Public Law 98–525). The Institute is an independent, nonprofit, national organization that promotes scholarship and education in matters relating to peace and international conflict resolution. The Institute is governed by a 15-member Board of Directors and is located in Washington, DC.

The Committee wishes to express its strong support of the Institute's enhanced efforts at community outreach. The Committee expects that with additional funds provided for fiscal year 1989, the Institute will further expand its efforts in this area. More specifically, the Committee requests that the Institute establish goals toward disseminating school curricula on conflict resolution and issues in the field of peace that will be appropriate and instructive for students at a variety of grade levels.

TITLE V—GENERAL PROVISIONS

The following items are identified pursuant to this requirement:

$19,500,000 for the Targeted Jobs Tax Credit Program;

$140,000,000 for family planning;

$207,750,000 for health professions;

$5,000,000 for organ transplantation;

$85,733,000 for preventive health and health services block grant;

$2,000,000 for prevention centers;

$70,947,000 for sexually transmitted diseases;

$9,645,000 for adolescent family life;

$328,462,000 for research training, National Institutes of Health;

$508,860,000 for the alcohol, drug abuse, and mental health block grant;

$180,000,000 for substance abuse grants to States;

$25,000,000 for alcohol, drug abuse, and mental health research training;

$26,235,000 for community support demonstrations;

$13,000,000 for protection and advocacy;

$116,602,000 for non-AIDS drug abuse research;

$15,229,000 for drug abuse direct operations;

$92,705,000 for non-AIDS alcoholism research;

$9,278,000 for direct operations;

$34,264,000 for the Office of Substance Abuse Prevention;

$2,310,000 for treatment outcome research;

$400,000,000 for refugee and entrant assistance;

$27,250,000 for runaway and homeless youth;

$5,000,000 for temporary childcare/crises nurseries;

$45,000,000 for foster care independent living;

$302,500,000 for Corporation for Public Broadcasting;

$8,000,000 for U.S. Institute of Peace; and

$26,025,000 for program support for ACTION, $713,000 more than the authorized ceiling.

BUDGETARY IMPACT OF BILL

PREPARED BY THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget authority		Outlays	
	Committee allocation	Amount in bill	Committee allocation	Amount in bill
Comparison of amounts in the bill with the Committee allocation to its subcommittees of amounts in the First Concurrent Resolution for 1989: Subcommittee on Labor-HHS-Education and Related Agencies	139.69	[1] 139,257	145.60	[2] 145,069
Projections of outlays associated with budget authority recommended in the bill:				
1989				[3] 104,817
1990				21,096
1991				4,924
1992				633
1993 and future year				5
Financial assistance to State and local governments for 1989 in the bill		59,430		46,062
	Direct loans		Loan guarantees	
Credit authority estimates, fiscal year 1989	63	1		

[1] Includes previously enacted budget authority.

[2] Includes outlays from prior-year budget authority.

[3] Excludes outlays from prior-year budget authority.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee reports on general appropriations bills identify each Committee amendment to the House bill "which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session."

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or joint resolution repealing or amending any statute or part of any statute include "(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken-through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee."

In compliance with this rule, the following changes in existing law proposed to be made by the bill are shown as follows: existing law to be omitted is enclosed in black brackets; new matter is printed in italic; and existing law in which no change is proposed is shown in roman.

The following item is identified pursuant to this requirement:

Public Law 93–406, the Employee Retirement Income Security Act of 1974, is amended as follows:

TABLE OF CONTENTS

Sec. 1. Short title and table of contents.

TITLE I—PROTECTION OF EMPLOYEE BENEFIT RIGHTS

PART 4—FIDCIARY RESPONSIBILITY

Sec. 408. Exemptions from prohibited transactions.
Sec. 409. Liability for breach of fiduciary duty.
Sec. 410. Exculpatory provisions; insurance.
Sec. 411. Prohibition against certain persons holding certain positions.
Sec. 412. Bonding.
Sec. 413. Limitation on actions.
[Sec. 414. Effective date.]
Sec. 414. Moratorium on employer reversions upon plan termination.
Sec. 415. Effective dates.

LIMITATION ON ACTIONS

SEC. 413. (a) No action may be commenced under this title with respect to a fiduciary's breach of any responsibility, duty, or obligation under this part, or with respect to a violation of this part, after the earlier of—

(1) six years after (A) the date of the last action which constituted a part of the breach or violation, or (B) in the case of an omission, the latest date on which the fiduciary could have cured the breach or violation, or

(2) three years after the earliest date (A) on which the plaintiff had actual knowledge of the breach or violation, or (B) on which a report from which he could reasonably be expected to have obtained knowledge of such breach or violation was filed with the Secretary under this title;

except that in the case of fraud or concealment, such action may be commenced not later than six years after the date of discovery of such breach or violation.

MORATORIUM ON EMPLOYER REVERSIONS UPON PLAN TERMINATION

SEC. 414. (a) IN GENERAL.—In any case in which a notice of intent to terminate a defined benefit plan (other than a multiemployer plan) is filed on or after June 21, 1988—

(1) subsections (a) and (b)(9) of section 408 shall not apply with respect to any transaction constituting a distribution to the employer in connection with such termination, and

(2) each party in interest having any authority with respect to the management or disposition of the assets of the plan shall be jointly and severally liable for a breach of fiduciary duty under this part unless, in the final distri-

bution of assets of the plan, any amount that would have been available for distribution to the employer under the terms of the plan (but for any amendments to the plan adopted in conformance with the requirements of this section) is distributed to participants or beneficiaries or paid into a trust established by the employer or plan administrator in accordance with subsection (b).

(b) TRUST.—The employer or plan administrator shall designate the trustee of a trust established pursuant to subsection (a). The terms of the trust shall provide for final distribution of the assets held by the trust in accordance with such applicable law as may be in effect on the date of distribution from the trust pursuant to subsection (d) and shall otherwise be consistent with any terms of the plan providing for such trust and such regulations as the Secretary may prescribe.

(c) EXCLUSIVE PURPOSES OF TRUST.—Any trust established pursuant to subsection (a) shall be used exclusively for—

(1) receiving and holding any amount paid into the trust under this section,

(2) defraying the reasonable administrative expenses incurred in carrying out the trusteeship under this section, and

(3) making the final distribution from the trust under subsection (d).

Any income earned on the balance in such trust shall be paid into such trust.

(d) END OF MORATORIUM.—Subject to applicable law as in effect on October 1, 1989—

(1) subsection (a) shall not apply with respect to terminations pursuant to which no distribution of plan assets has commenced as of such date, and

(2) during the 30-day period beginning on such date, any trust established pursuant to subsection (a) shall be dissolved and any balance (including income) in such trust at the time of its dissolution shall be distributed from the trust in accordance with the terms of the trust.

EFFECTIVE DATE

[SEC. 414.] *SEC. 415.* (a) Except as provided in subsections (b), (c), and (d), this part shall take effect on January 1, 1975.

(b)(1) The provisions of this part authorizing the Secretary to promulgate regulations shall take effect on the date of enactment of this Act.

(2) Upon application of a plan, the Secretary may postpone until not later than January 1, 1976, the applicability of any provision of sections 402, 403 (other than 403(c)), 405 (other than 405 (a) and (d)), and 410(a), as it applies to any plan in existence on the date of enactment of this Act if he determines

such postponements is (A) necessary to amend the instrument establishing the plan under which the plan is maintained and (B) not adverse to the interest of participants and beneficiaries.

(3) This part shall take effect on the date of enactment of this Act with respect to a plan which terminates after June 30, 1974, and before January 1, 1976, and to which at the time of termination section 4021 applies.

VOTES IN FULL COMMITTEE

A motion to strike the language with regard to rape and incest was defeated by a vote of 15 to 14.

An amendment to strike matter relating to the pension reversion provision, was defeated by a vote of 19 to 8.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
TITLE I -- DEPARTMENT OF LABOR							
EMPLOYMENT AND TRAINING ADMINISTRATION							
PROGRAM ADMINISTRATION							
Job training programs	17,192,000	17,522,000	17,522,000	17,522,000	+330,000	---	---
Employment security	3,199,000	3,506,000	3,506,000	3,506,000	+307,000	---	---
Trust funds	(14,458,000)	(14,760,000)	(14,760,000)	(14,760,000)	(+102,000)	---	---
Financial control and management systems	16,666,000	16,694,000	16,694,000	16,694,000	+28,000	---	---
Trust funds	(9,783,000)	(9,246,000)	(9,246,000)	(9,246,000)	(-537,000)	---	---
Executive direction and administration	3,314,000	3,391,000	3,391,000	3,391,000	+77,000	---	---
Trust funds	(2,598,000)	(2,704,000)	(2,704,000)	(2,704,000)	(+106,000)	---	---
Regional operations	16,976,000	17,799,000	17,799,000	17,000,000	+24,000	-799,000	-799,000
Trust funds	(17,341,000)	(19,897,000)	(19,897,000)	(23,696,000)	(+6,355,000)	(+3,799,000)	(+3,799,000)
Apprenticeship services	13,525,000	13,377,000	13,377,000	13,525,000	---	+148,000	+148,000
Total, Program Administration	115,252,000	118,896,000	118,896,000	122,044,000	+6,792,000	+3,148,000	+3,148,000
Federal funds	70,872,000	72,289,000	72,289,000	71,638,000	+766,000	-651,000	-651,000
Trust funds	(44,380,000)	(46,607,000)	(46,607,000)	(50,406,000)	(+6,026,000)	(+3,799,000)	(+3,799,000)
TRAINING AND EMPLOYMENT SERVICES							
Grants to States:							
Block grant	1,809,486,000	1,809,486,000	1,809,486,000	1,821,486,000	+12,000,000	+12,000,000	+12,000,000
Summer youth employment and training program:							

Summer 1989 and 1990	718,050,000	718,050,000	718,050,000	718,050,000	---	---	---
Dislocated worker assistance	287,220,000	---	287,220,000	287,220,000	---	+287,220,000	---
Federally administered programs:							
Native Americans	59,713,000	59,713,000	59,713,000	59,713,000	---	---	---
Migrants and seasonal farmworkers	65,572,000	57,904,000	70,572,000	68,172,000	+2,600,000	+10,268,000	-2,400,000
Job Corps	716,135,000	710,631,000	763,631,000	736,135,000	+20,000,000	+25,504,000	-27,496,000
Veterans' employment	9,966,000	9,633,000	9,966,000	9,633,000	-333,000	---	-333,000
National activities:							
Pilots and demonstrations	38,964,000	31,620,000	31,620,000	29,620,000	-9,344,000	-2,000,000	-2,000,000
Research, demonstration and evaluation	18,227,000	18,592,000	13,592,000	18,592,000	+365,000	---	+5,000,000
Other	24,356,000	15,195,000	22,195,000	20,695,000	-3,661,000	+5,500,000	-1,500,000
Subtotal, National activities	81,547,000	65,407,000	67,407,000	68,907,000	-12,640,000	+3,500,000	+1,500,000
Subtotal, Federal activities	932,933,000	903,288,000	971,289,000	942,560,000	+9,627,000	+39,272,000	-28,729,000
Total, Job Training Partnership Act	3,747,689,000	3,430,824,000	3,786,045,000	3,769,316,000	+21,627,000	+338,492,000	-16,729,000
Trade adjustment program activities	47,870,000	---	50,000,000	47,870,000	---	+47,870,000	-2,130,000
Job training for the homeless	(9,574,000)	---	DEFER	---	(-9,574,000)	---	---
Total, Training and Employment Services	3,795,559,000	3,430,824,000	3,836,045,000	3,817,186,000	+21,627,000	+386,362,000	-18,859,000
(Unauthorized, not considered)	(9,574,000)	---	DEFER	---	(-9,574,000)	---	---
Total, authorized and unauthorized	3,805,133,000	3,430,824,000	3,836,045,000	3,817,186,000	+12,053,000	+386,362,000	-18,859,000
COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS	331,260,000	336,000,000	346,000,000	350,000,000	+18,740,000	+14,000,000	+4,000,000
WORKER READJUSTMENT							
Current activities: 1/							
Trade adjustment assistance	---	132,000,000	---	---	---	-132,000,000	---
Unemployment assistance and payments under other Federal unemployment programs	---	2,000,000	---	---	---	-2,000,000	---
Subtotal	---	134,000,000	---	---	---	-134,000,000	---

1/ President's budget proposes to replace FUBA, dislocated worker and trade adjustment under TES with a new Worker Readjustment account.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom- mendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
New activities: 1/							
Trade adjustment assistance savings	---	(-102,000,000)	DEFER	---	---	(+102,000,000)	---
Worker readjustment assistance, new	---	(948,000,000)	DEFER	---	---	(-948,000,000)	---
Subtotal	---	(846,000,000)	DEFFR	---	---	(-846,000,000)	---
Total, Worker readjustment, current request	---	134,000,000	---	---	---	-134,000,000	---
(Unauthorized, not considered)	---	(846,000,000)	DEFER	---	---	(-846,000,000)	---
Total, authorized and unauthorized	---	(846,000,000)	---	---	---	(-846,000,000)	---
FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES 2/	141,000,000	---	134,000,000	134,000,000	-7,000,000	+134,000,000	---
STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS							
Unemployment Compensation (Trust Funds):							
State Operations	(1,230,966,000)	(1,255,883,000)	(1,255,883,000)	(1,255,883,000)	(+24,917,000)	---	---
State integrity activities	(244,931,000)	(254,587,000)	(254,587,000)	(254,587,000)	(+9,656,000)	---	---
National Activities	(9,751,000)	(10,151,000)	(10,151,000)	(10,151,000)	(+400,000)	---	---
Contingency	(175,076,000)	(157,479,000)	(157,479,000)	(157,479,000)	(-17,597,000)	---	---
Subtotal, Unemployment Compensation(trust funds)	(1,660,724,000)	(1,678,100,000)	(1,678,100,000)	(1,678,100,000)	(+17,376,000)	---	---
Employment Service:							
Allotments to States:							
Federal funds	21,733,000	20,400,000	21,733,000	21,733,000	---	+1,333,000	---

Trust funds	(701,296,000)	(658,100,000)	(751,296,000)	(751,296,000)	(+50,000,000)	(+93,196,000)	---
Subtotal	723,029,000	678,500,000	773,029,000	773,029,000	+50,000,000	+94,529,000	---
National Activities:							
Federal funds	670,000	1,100,000	1,100,000	1,100,000	+430,000	---	---
Trust funds	(56,385,000)	(35,994,000)	(43,318,000)	(55,494,000)	(-891,000)	(+19,500,000)	(+12,176,000)
Subtotal, Employment Service	780,084,000	715,594,000	817,447,000	829,623,000	+49,539,000	+114,029,000	+12,176,000
Federal funds	22,403,000	21,500,000	22,833,000	22,833,000	+430,000	+1,333,000	---
Trust funds	(757,681,000)	(694,094,000)	(794,614,000)	(806,790,000)	(+49,109,000)	(+112,696,000)	(+12,176,000)
Total, State Unempl. Ins. and Empl. Ser. Opers.	2,440,808,000	2,393,694,000	2,495,547,000	2,507,723,000	+66,915,000	+114,029,000	+12,176,000
Federal Funds	22,403,000	21,500,000	22,833,000	22,833,000	+430,000	+1,333,000	---
Trust Funds	(2,418,405,000)	(2,372,194,000)	(2,472,714,000)	(2,484,890,000)	(+66,485,000)	(+112,696,000)	(+12,176,000)
ADVANCES TO UNEMPLOYMENT TRUST FUND AND OTHER FUNDS	30,000,000	124,000,000	124,000,000	124,000,000	+94,000,000	---	---
Total, Employment & Training Administration	6,853,879,000	6,537,414,000	7,054,488,000	7,054,953,000	+201,074,000	+517,539,000	+465,000
Federal funds	4,391,094,000	4,118,613,000	4,535,167,000	4,519,657,000	+128,563,000	+401,044,000	-15,510,000
(Unauthorized, not considered)	(9,574,000)	(846,000,000)	DEFER	---	(-9,574,000)	(-846,000,000)	---
Trust funds	(2,462,785,000)	(2,418,801,000)	(2,519,321,000)	(2,535,296,000)	(+72,511,000)	(+116,495,000)	(+15,975,000)

LABOR - MANAGEMENT SERVICES

SALARIES AND EXPENSES

Labor-management relations service	5,639,000	5,793,000	5,793,000	5,793,000	+154,000	---	---
Labor-management standards enforcement	24,547,000	25,333,000	25,333,000	25,333,000	+786,000	---	---
Pension and welfare benefit programs	46,590,000	41,933,000	41,933,000	41,933,000	-4,657,000	---	---
Total, LMS	76,776,000	73,059,000	73,059,000	73,059,000	-3,717,000	---	---

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1/ Proposed for later transmittal in President's request.

2/ President's budget proposes to replace FUBA, dislocated worker and trade adjustment under TES with a new Worker Readjustment account.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
PENSION BENEFIT GUARANTY CORPORATION							
Program Administration (Trust Funds)	(38,329,000)	(54,232,000)	(54,232,000)	(54,232,000)	(+15,903,000)	---	---
EMPLOYMENT STANDARDS ADMINISTRATION							
SALARIES AND EXPENSES							
Enforcement of wage and hour standards	82,359,000	90,035,000	90,035,000	90,035,000	+7,676,000	---	---
Federal contractor EEO standards enforcement	50,725,000	52,493,000	52,493,000	52,493,000	+1,768,000	---	---
Federal programs for workers' compensation	61,321,000	57,886,000	57,886,000	57,886,000	-3,435,000	---	---
Trust funds	(467,000)	(526,000)	(526,000)	(526,000)	(+59,000)	---	---
Executive direction and support services	13,304,000	14,075,000	14,075,000	14,075,000	+771,000	---	---
Total, salaries and expenses	208,176,000	215,015,000	215,015,000	215,015,000	+6,839,000	---	---
Federal funds	207,709,000	214,489,000	214,489,000	214,489,000	+6,780,000	---	---
Trust funds	(467,000)	(526,000)	(526,000)	(526,000)	(+59,000)	---	---
SPECIAL BENEFITS							
Federal employees compensation act benefits 1/	170,000,000	288,000,000	288,000,000	251,000,000	+81,000,000	-37,000,000	-37,000,000
Longshore and harbor workers' benefits	4,000,000	4,000,000	4,000,000	4,000,000	---	---	---
Total, Special Benefits	174,000,000	292,000,000	292,000,000	255,000,000	+81,000,000	-37,000,000	-37,000,000

BLACK LUNG DISABILITY TRUST FUND							
Benefit payments and interest on advances 2/	594,522,000	633,435,000	633,435,000	633,435,000	+38,913,000	---	---
Employment Standards Admin., salaries & expenses	28,217,000	30,210,000	30,210,000	30,210,000	+1,993,000	---	---
Departmental Management, salaries and expenses	25,924,000	24,054,000	24,054,000	27,234,000	+1,310,000	+3,180,000	+3,180,000
Departmental Management, inspector general	506,000	515,000	515,000	515,000	+9,000	---	---
Subtotal, Black Lung Disablty. Trust Fund, apprn	649,169,000	688,214,000	688,214,000	691,394,000	+42,225,000	+3,180,000	+3,180,000
Treasury administrative costs (indefinite)	756,000	756,000	756,000	756,000	---	---	---
Repayment of Advances (indefinite)	38,800,000	---	---	---	-38,800,000	---	---
Total, Black Lung Disability Trust Fund	688,725,000	688,970,000	688,970,000	692,150,000	+3,425,000	+3,180,000	+3,180,000
Total, Employment Standards Administration	1,070,901,000	1,195,985,000	1,195,985,000	1,162,165,000	+91,264,000	-33,820,000	-33,820,000
Federal funds	1,070,434,000	1,195,459,000	1,195,459,000	1,161,639,000	+91,205,000	-33,820,000	-33,820,000
Trust funds	(467,000)	(526,000)	(526,000)	(526,000)	(+59,000)	---	---
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION							
SALARIES AND EXPENSES							
Safety and health standards	6,484,000	6,751,000	6,751,000	6,751,000	+267,000	---	---
Enforcement:							
Federal Enforcement	111,178,000	116,969,000	116,969,000	117,969,000	+6,791,000	+1,000,000	+1,000,000
State programs	40,524,000	41,334,000	43,000,000	42,334,000	+1,810,000	+1,000,000	-666,000
Technical Support	16,558,000	17,486,000	17,486,000	17,486,000	+928,000	---	---
Compliance Assistance	35,279,000	36,078,000	36,078,000	36,078,000	+799,000	---	---
Safety and health statistics	19,654,000	20,241,000	20,241,000	20,241,000	+587,000	---	---
Executive direction and administration	5,797,000	5,992,000	5,992,000	5,992,000	+195,000	---	---
Total, OSHA	235,474,000	244,851,000	246,517,000	246,851,000	+11,377,000	+2,000,000	+334,000

1/ FY 1989 request includes $35 million to liquidate FY 1988 requirements financed through subsequent year borrowing.

2/ FY 1989 request includes $13,970,000 to liquidate FY 1988 requirements financed through subsequent year borrowing.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
MINE SAFETY AND HEALTH ADMINISTRATION							
SALARIES AND EXPENSES							
Enforcement:							
Coal	82,748,000	82,879,000	82,879,000	82,879,000	+131,000	---	---
Metal/nonmetal	31,611,000	32,498,000	32,498,000	32,498,000	+887,000	---	---
Standards development	1,141,000	1,920,000	1,920,000	1,920,000	+779,000	---	---
Assessments	2,035,000	2,164,000	2,164,000	2,164,000	+129,000	---	---
Educational policy and development	11,605,000	12,070,000	12,070,000	12,070,000	+465,000	---	---
Technical support	20,126,000	20,833,000	20,833,000	20,833,000	+707,000	---	---
Program administration	10,927,000	12,233,000	12,233,000	12,233,000	+1,306,000	---	---
Total, Mine Safety and Health Administration	160,193,000	164,597,000	164,597,000	164,597,000	+4,404,000	---	---
BUREAU OF LABOR STATISTICS							
SALARIES AND EXPENSES							
Employment and Unemployment Statistics	60,008,000	64,955,000	64,955,000	64,955,000	+4,947,000	---	---
Labor Market Information (Trust Funds)	(41,569,000)	(46,323,000)	(46,323,000)	(46,323,000)	(+4,754,000)	---	---
Prices and cost of living	57,108,000	72,098,000	72,098,000	72,098,000	+14,990,000	---	---
Wages and industrial relations	20,963,000	22,028,000	22,028,000	22,028,000	+1,065,000	---	---
Productivity and technology	5,180,000	5,457,000	5,457,000	5,457,000	+277,000	---	---
Economic growth and employment projections	3,198,000	3,347,000	3,347,000	3,347,000	+149,000	---	---
Executive direction and staff services	21,231,000	22,512,000	22,512,000	22,512,000	+1,281,000	---	---

Consumer Price Index Revision	8,793,000	---	---	---	-8,793,000	---	---
Total, Bureau of Labor Statistics	218,050,000	236,720,000	236,720,000	236,720,000	+18,670,000	---	---
Federal Funds	176,481,000	190,397,000	190,397,000	190,397,000	+13,916,000	---	---
Trust Funds	(41,569,000)	(46,323,000)	(46,323,000)	(46,323,000)	(+4,754,000)	---	---
DEPARTMENTAL MANAGEMENT							
SALARIES AND EXPENSES							
Executive direction	15,089,000	16,556,000	16,556,000	16,556,000	+1,467,000	---	---
Legal services	45,529,000	45,959,000	45,959,000	45,959,000	+430,000	---	---
Trust funds	(274,000)	(285,000)	(285,000)	(285,000)	(+11,000)	---	---
International labor affairs	5,887,000	6,243,000	6,243,000	6,243,000	+356,000	---	---
Administration and management	24,635,000	24,776,000	24,776,000	25,776,000	+1,141,000	+1,000,000	+1,000,000
Adjudication	11,703,000	11,522,000	11,522,000	11,522,000	-181,000	---	---
Promoting employment of the handicapped	2,434,000	2,468,000	2,468,000	2,468,000	+34,000	---	---
Women's Bureau	5,982,000	6,083,000	6,583,000	6,583,000	+601,000	+500,000	---
Civil Rights Activities	3,670,000	3,732,000	3,732,000	3,732,000	+62,000	---	---
Undistributed reduction	---	---	-500,000	---	---	---	+500,000
Total, Salaries and expenses	115,203,000	117,624,000	117,624,000	119,124,000	+3,921,000	+1,500,000	+1,500,000
Federal funds	114,929,000	117,339,000	117,339,000	118,839,000	+3,910,000	+1,500,000	+1,500,000
Trust funds	(274,000)	(285,000)	(285,000)	(285,000)	(+11,000)	---	---
VETERANS EMPLOYMENT AND TRAINING							
State Administration:							
Disabled Veterans Outreach Program	(72,400,000)	(73,848,000)	(73,848,000)	(73,848,000)	(+1,448,000)	---	---
Local Veterans Employment Program	(52,365,000)	(53,412,000)	(59,893,000)	(67,812,000)	(+15,447,000)	(+14,400,000)	(+7,919,000)
Subtotal, State Administration	(124,765,000)	(127,260,000)	(133,741,000)	(141,660,000)	(+16,895,000)	(+14,400,000)	(+7,919,000)
Federal Administration	(14,849,000)	(15,146,000)	(15,146,000)	(18,346,000)	(+3,497,000)	(+3,200,000)	(+3,200,000)
Total, Trust Funds	(139,614,000)	(142,406,000)	(148,887,000)	(160,006,000)	(+20,392,000)	(+17,600,000)	(+11,119,000)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
OFFICE OF THE INSPECTOR GENERAL							
Audit:							
Federal funds	19,756,000	20,420,000	20,420,000	20,420,000	+664,000	---	---
Trust funds	(5,092,000)	(4,526,000)	(4,526,000)	(4,526,000)	(-566,000)	---	---
Investigation:							
Federal funds	5,989,000	6,038,000	6,038,000	6,038,000	+49,000	---	---
Trust funds	(1,109,000)	(1,175,000)	(1,175,000)	(1,175,000)	(+66,000)	---	---
Office of Labor Racketeering	7,452,000	8,395,000	8,395,000	9,120,000	+1,668,000	+725,000	+725,000
Executive Direction and Administration	3,854,000	4,644,000	4,644,000	4,644,000	+790,000	---	---
Total, Office of the Inspector General	43,252,000	45,198,000	45,198,000	45,923,000	+2,671,000	+725,000	+725,000
Federal funds	37,051,000	39,497,000	39,497,000	40,222,000	+3,171,000	+725,000	+725,000
Trust funds	(6,201,000)	(5,701,000)	(5,701,000)	(5,701,000)	(-500,000)	---	---
Total, Departmental Management	298,069,000	305,228,000	311,709,000	325,053,000	+26,984,000	+19,825,000	+13,344,000
Federal funds	151,980,000	156,836,000	156,836,000	159,061,000	+7,081,000	+2,225,000	+2,225,000
Trust funds	(146,089,000)	(148,392,000)	(154,873,000)	(165,992,000)	(+19,903,000)	(+17,600,000)	(+11,119,000)
Total, Labor Department	8,951,671,000	8,812,086,000	9,337,307,000	9,317,630,000	+365,959,000	+505,544,000	-19,677,000
Federal funds	6,262,432,000	6,143,812,000	6,562,032,000	6,515,261,000	+252,829,000	+371,449,000	-46,771,000
(House deferred)	(9,574,000)	(846,000,000)	DEFER	---	(-9,574,000)	(-846,000,000)	---

Trust funds..................................	(2,689,239,000)	(2,668,274,000)	(2,775,275,000)	(2,802,369,000)	(+113,130,000)	(+134,095,000)	(+27,094,000)

TITLE II--DEPARTMENT OF HEALTH AND HUMAN SERVICES

PRIORITY DISEASE CONTROL AND RESEARCH
ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS) 1/
(NON-ADD)

Health Resorces and Services Administration:							
Training of health personnel......................	(11,106,000)	(23,000,000)	(15,000,000)	(24,240,000)	(+13,154,000)	(+1,260,000)	(+9,260,000)
Facilities renovation grants......................	(6,702,000)	---	(5,000,000)	---	(-6,702,000)	---	(-5,000,000)
Pediatric health care demonstrations 2/...........	(4,787,000)	(5,000,000)	(8,000,000)	(7,000,000)	(+2,213,000)	(+2,000,000)	(-1,000,000)
Service demonstrations, general...................	(14,361,000)	(10,567,000)	(10,567,000)	(19,056,000)	(+4,695,000)	(+8,489,000)	(+8,489,000)
Program support...................................	---	(1,449,000)	(1,449,000)	---	---	(-1,449,000)	(-1,449,000)
Subtotal, HRSA..................................	(36,956,000)	(40,016,000)	(40,016,000)	(50,316,000)	(+13,360,000)	(+10,300,000)	(+10,300,000)
Centers for Disease Control........................	(304,942,000)	(400,719,000)	(408,219,000)	(384,419,000)	(+79,477,000)	(-16,300,000)	(-23,800,000)
National Institutes of Health:							
National Cancer Institute.........................	(89,944,000)	(125,280,000)	(125,280,000)	(125,280,000)	(+35,336,000)	---	---
National Heart, Lung, and Blood Institute.........	(24,738,000)	(39,032,000)	(39,032,000)	(39,032,000)	(+14,294,000)	---	---
National Institute of Dental Research.............	(3,169,000)	(3,526,000)	(3,526,000)	(3,526,000)	(+357,000)	---	---
National Institute of Diabetes, Digestive, and Kidney Diseases...............................	(3,351,000)	(3,650,000)	(3,650,000)	(3,650,000)	(+299,000)	---	---
National Institute of Neurological and Communicative Disorders and Stroke..............	(12,212,000)	(13,393,000)	(13,393,000)	(13,393,000)	(+1,181,000)	---	---
National Institue of Allergy and Infectious Diseases....................................	(223,728,000)	(310,268,000)	(310,268,000)	(323,268,000)	(+99,540,000)	(+13,000,000)	(+13,000,000)
National Institute of General Medical Sciences....	(2,394,000)	(11,100,000)	(11,100,000)	(11,100,000)	(+8,706,000)	---	---
National Institute of Child Health and Human Development...................................	(14,292,000)	(20,443,000)	(20,443,000)	(22,443,000)	(+8,151,000)	(+2,000,000)	(+2,000,000)

1/ President's budget proposes a consolidated account for AIDS shown here for comparison purposes.

2/ Includes chronic and rehabilitative care.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
National Eye Institute	(3,830,000)	(4,947,000)	(4,947,000)	(4,947,000)	(+1,117,000)	---	---
National Institute of Environmental Health Sciences	(3,917,000)	(4,234,000)	(4,234,000)	(4,234,000)	(+317,000)	---	---
National Institute on Aging	(361,000)	(452,000)	(452,000)	(452,000)	(+91,000)	---	---
National Institute of Arthritis and Musculosketal and Skin Diseases	(660,000)	(687,000)	(687,000)	(687,000)	(+27,000)	---	---
Research Resources	(50,418,000)	(38,010,000)	(38,010,000)	(38,010,000)	(-12,408,000)	---	---
National Center for Nursing Research	(510,000)	(707,000)	(707,000)	(707,000)	(+197,000)	---	---
John E. Fogarty International Center	(4,500,000)	(4,736,000)	(4,736,000)	(4,736,000)	(+236,000)	---	---
Office of the Director	(10,632,000)	(7,165,000)	(7,165,000)	(13,165,000)	(+2,533,000)	(+6,000,000)	(+6,000,000)
Buildings and facilities	(19,150,000)	---	---	(10,000,000)	(-9,150,000)	(+10,000,000)	(+10,000,000)
Subtotal, NIH	(467,806,000)	(587,630,000)	(587,630,000)	(618,630,000)	(+150,824,000)	(+31,000,000)	(+31,000,000)
Alcohol, Drug Abuse & Mental Health Administration:							
Mental Health	(31,129,000)	(49,364,000)	(49,364,000)	(49,364,000)	(+18,235,000)	---	---
Drug Abuse	(76,335,000)	(121,998,000)	(121,998,000)	(121,998,000)	(+45,663,000)	---	---
Alcoholism	(4,793,000)	(6,255,000)	(6,255,000)	(6,255,000)	(+1,462,000)	---	---
Subtotal, ADAMHA	(112,257,000)	(177,617,000)	(177,617,000)	(177,617,000)	(+65,360,000)	---	---
Office of the Assistant Secretary for Health 1/	(4,308,000)	(28,598,000)	(21,098,000)	(13,598,000)	(+9,290,000)	(-15,000,000)	(-7,500,000)
Total Priority disease control and research (AIDS)	(926,269,000)	(1,234,580,000)	(1,234,580,000)	(1,244,580,000)	(+318,311,000)	(+10,000,000)	(+10,000,000)

1/ Includes funds for Office of Minority Health.

Acquired Immune Deficiency Syndrome (AIDS)........	(-926,269,000)	(-1,234,580,000)	(-1,234,580,000)	(-1,244,580,000)	(-318,311,000)	(-10,000,000)	(-10,000,000)
HEALTH RESOURCES AND SERVICES ADMINISTRATION							
HEALTH RESOURCES AND SERVICES							
Health Care Delivery and Assistance:							
Community health centers 2/........................	(395,210,000)	(400,000,000)	DEFER	(419,850,000)	(+24,640,000)	(+19,850,000)	(+419,850,000)
Migrant health..	(43,466,000)	(44,423,000)	DEFER	(46,200,000)	(+2,734,000)	(+1,777,000)	(+46,200,000)
Infant mortality initiative........................	20,105,000	20,000,000	20,000,000	20,800,000	+695,000	+800,000	+800,000
Black lung clinics.................................	3,255,000	3,255,000	3,255,000	3,255,000	---	---	---
Health care for the homeless.......................	(14,361,000)	(15,000,000)	DEFER	(15,000,000)	(+639,000)	---	(+15,000,000)
Family planning 3/.................................	(139,663,000)	(140,000,000)	DEFER	(140,000,000)	(+337,000)	---	(+140,000,000)
National Health Service Corps: 1/ 2/							
Field placements................................	40,407,000	35,000,000	35,000,000	40,350,000	-57,000	+5,350,000	+5,350,000
(Limitation on direct loans)..................	(957,000)	(500,000)	(500,000)	(500,000)	(-457,000)	---	---
Recruitment:							
Scholarships.................................	2,202,000	---	2,000,000	---	-2,202,000	---	-2,000,000
Loan repayments, general....................	---	2,202,000	4,000,000	8,002,000	+8,002,000	+5,800,000	+4,002,000
Loan repayments, nursing....................	---	---	4,000,000	---	---	---	-4,000,000
Subtotal, Natl Health Service Corps..........	42,609,000	37,202,000	45,000,000	48,352,000	+5,743,000	+11,150,000	+3,352,000
Hansen's disease services (Carville)...............	18,245,000	18,245,000	18,750,000	18,245,000	---	---	-505,000
Payment to Hawaii treatment of Hansen's Disease...	3,159,000	3,159,000	3,159,000	3,300,000	+141,000	+141,000	+141,000
Rural health research centers......................	1,436,000	1,500,000	1,500,000	1,500,000	+64,000	---	---
Home health demonstration grants...................	4,787,000	---	---	4,787,000	---	+4,787,000	+4,787,000
Total, Health Care Delivery & Assistance........	93,596,000	83,361,000	91,664,000	100,239,000	+6,643,000	+16,878,000	+8,575,000

1/ Excludes legislative savings of $390,000 proposed for later transmittal.

2/ Reflects reprogramming of $12,250,000.

3/ President's FY 1989 budget requests family planning funds under "Public Health Service Management" account.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −): 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Health Professions:							
Consolidated health professions grants	---	(40,000,000)	DEFER	---	---	(-40,000,000)	---
Exceptional need scholarships	(6,702,000)	---	DEFER	(6,702,000)	---	(+6,702,000)	(+6,702,000)
Excellence in minority health education grants	9,574,000	---	9,574,000	9,574,000	---	+9,574,000	---
Public health/health administration:							
Public Health capitation	(4,787,000)	---	DEFER	(4,787,000)	---	(+4,787,000)	(+4,787,000)
Health Administration grants	(1,436,000)	---	DEFER	(1,436,000)	---	(+1,436,000)	(+1,436,000)
Public Health traineeships	(2,872,000)	---	DEFER	(2,872,000)	---	(+2,872,000)	(+2,872,000)
Health Administration traineeships	(479,000)	---	DEFER	(479,000)	---	(+479,000)	(+479,000)
Preventive medicine residencies	(1,532,000)	---	DEFER	(1,532,000)	---	(+1,532,000)	(+1,532,000)
Family Med/Gen denistry res & trng	(35,405,000)	---	DEFER	(35,405,000)	---	(+35,405,000)	(+35,405,000)
General Internal Medicine and Pediatrics	(17,712,000)	---	DEFER	(17,712,000)	---	(+17,712,000)	(+17,712,000)
Family medicine departments	(6,702,000)	---	DEFER	(6,702,000)	---	(+6,702,000)	(+6,702,000)
Physician assistants	(4,596,000)	---	DEFER	(4,596,000)	---	(+4,596,000)	(+4,596,000)
Area health education centers	(17,233,000)	---	DEFER	(17,233,000)	---	(+17,233,000)	(+17,233,000)
Health professions data analysis	(1,915,000)	---	DEFER	(1,915,000)	---	(+1,915,000)	(+1,915,000)
Disadvantaged Assistance	(27,406,000)	---	DEFER	(27,406,000)	---	(+27,406,000)	(+27,406,000)
Special Projects: (sections 788 and 301)							
Health professions spec ed initiatives	(2,394,000)	---	DEFER	(2,394,000)	---	(+2,394,000)	(+2,394,000)
Geriatric training and research	(12,446,000)	---	DEFER	(14,000,000)	(+1,554,000)	(+14,000,000)	(+14,000,000)
Two year medical schools	(479,000)	---	DEFER	(479,000)	---	(+479,000)	(+479,000)
Pediatric emergency care	(1,915,000)	---	DEFER	(3,000,000)	(+1,085,000)	(+3,000,000)	(+3,000,000)
Pacific Basin activities (including Medical Officer training)	(2,326,000)	---	DEFER	(2,500,000)	(+174,000)	(+2,500,000)	(+2,500,000)

Nurse training:							
Advanced nurse training..........................	(16,755,000)	---	DEFER	(17,500,000)	(+745,000)	(+17,500,000)	(+17,500,000)
Nurse practitioner............................	(11,489,000)	---	DEFER	(12,000,000)	(+511,000)	(+12,000,000)	(+12,000,000)
Special projects (includes sec. 820 (d)(2))...	(11,680,000)	---	DEFER	(12,200,000)	(+520,000)	(+12,200,000)	(+12,200,000)
Traineeships.................................	(12,446,000)	---	DEFER	(13,000,000)	(+554,000)	(+13,000,000)	(+13,000,000)
Nurse Anesthetists...........................	(766,000)	---	DEFER	(800,000)	(+34,000)	(+800,000)	(+800,000)
Faculty fellowships..........................	(910,000)	---	DEFER	(1,100,000)	(+190,000)	(+1,100,000)	(+1,100,000)
Subtotal, Nurse training....................	(54,046,000)	---	DEFER	(56,600,000)	(+2,554,000)	(+56,600,000)	(+56,600,000)
Total, Health professions.......................	9,574,000	---	9,574,000	9,574,000	---	+9,574,000	---
(Unauthorized, not considered).................	(202,383,000)	(40,000,000)	DEFER	(207,750,000)	(+5,367,000)	(+167,750,000)	(+207,750,000)
Total, authorized and unauthorized.............	211,957,000	40,000,000	9,574,000	217,324,000	+5,367,000	+177,324,000	+207,750,000
MCH and Resources Development:							
Maternal & child health block grant...............	526,570,000	561,000,000	550,000,000	561,000,000	+34,430,000	---	+11,000,000
Organ transplantation............................	(6,032,000)	(4,000,000)	DEFER	(5,000,000)	(-1,032,000)	(+1,000,000)	(+5,000,000)
Health teaching facilities interest subsidies.....	96,000	500,000	500,000	500,000	+404,000	---	---
Total, Resources Development...................	526,666,000	561,500,000	550,500,000	561,500,000	+34,834,000	---	+11,000,000
Buildings and facilities.............................	718,000	400,000	800,000	1,000,000	+282,000	+600,000	+200,000
Program management/Program support, HRSA..............	81,309,000	76,573,000	87,000,000	93,456,000	+12,147,000	+16,883,000	+6,456,000
Acquired Immune Deficiency Syndrome (AIDS) 1/.........	36,956,000	40,016,000	40,016,000	50,316,000	+13,360,000	+10,300,000	+10,300,000
National practitioner data bank 2/....................	---	2,800,000	---	2,800,000	+2,800,000	---	+2,800,000
Less transfers from loan revolving funds..............	---	---	-10,000,000	-10,000,000	-10,000,000	-10,000,000	---
Total, Health resources and services, current action.................................	748,819,000	764,650,000	769,554,000	808,885,000	+60,066,000	+44,235,000	+39,331,000
(Unauthorized, not considered)...............	(801,115,000)	(643,423,000)	DEFER	(833,800,000)	(+32,685,000)	(+190,377,000)	(+833,800,000)
Total, authorized and unauthorized.............	(1,549,934,000)	(1,408,073,000)	(769,554,000)	(1,642,685,000)	(+92,751,000)	(+234,612,000)	(+873,131,000)

1/ President's budget requests AIDS funding for FY 1989 under consolidated account.

2/ President requested as a separate account.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
MEDICAL FACILITIES GUARANTEE AND LOAN FUND	22,000,000	21,600,000	21,600,000	21,600,000	-400,000	---	---
HEALTH CARE QUALITY DATA BANK 1/ (non-add)	---	(2,800,000)	---	(2,800,000)	(+2,800,000)	---	(+2,800,000)
HEALTH CARE IMPROVEMENT	---	15,000,000	---	---	---	-15,000,000	---
Total, Health Resources and Services Admin	770,819,000	801,250,000	791,154,000	830,485,000	+59,666,000	+29,235,000	+39,331,000
(Unauthorized, not considered) by House	(801,115,000)	(643,423,000)	DEFER	(833,800,000)	(+32,485,000)	(+190,377,000)	(+833,800,000)
Total, authorized and unauthorized	(1,571,934,000)	(1,444,673,000)	(791,154,000)	(1,664,285,000)	(+92,351,000)	(+219,612,000)	(+873,131,000)
HEAL loan guarantees (non-add)	(305,000,000)	(100,000,000)	DEFFR	(325,000,000)	(+20,000,000)	(+225,000,000)	(+325,000,000)
CENTERS FOR DISEASE CONTROL							
DISEASE CONTROL							
Preventive Health Services Block Grant	(85,733,000)	(85,659,000)	DEFER	(85,733,000)	---	(+74,000)	(+85,733,000)
Prevention centers	(1,915,000)	(2,000,000)	DEFER	(2,000,000)	(+85,000)	---	(+2,000,000)
Sexually transmitted diseases:							
Grants	(54,572,000)	(54,791,000)	DEFER	(60,291,000)	(+5,719,000)	(+5,500,000)	(+60,291,000)
Direct operations	(10,589,000)	(10,656,000)	DEFER	(10,656,000)	(+67,000)	---	(+10,656,000)
Subtotal, Sexually transmitted diseases	(65,161,000)	(65,447,000)	DEFER	(70,947,000)	(+5,786,000)	(+5,500,000)	(+70,947,000)

1/ President requested as a separate account.

Immunization:							
Grants	86,166,000	92,837,000	108,337,000	148,137,000	+61,971,000	+55,300,000	+39,800,000
Direct operations	8,202,000	8,251,000	8,251,000	8,251,000	+49,000	---	---
Vaccine stockpile	3,830,000	---	---	4,000,000	+170,000	+4,000,000	+4,000,000
National vaccine program coordination	---	500,000	500,000	3,100,000	+3,100,000	+2,600,000	+2,600,000
Subtotal, Immunization programs	98,198,000	101,588,000	117,088,000	163,488,000	+65,290,000	+61,900,000	+46,400,000
Infectious disease excluding AIDS/TB	37,065,000	41,958,000	41,958,000	41,958,000	+4,893,000	---	---
Tuberculosis grants	6,702,000	6,702,000	6,702,000	6,702,000	---	---	---
Chronic & environmental disease prevention	43,158,000	43,415,000	66,479,000	43,415,000	+257,000	---	-23,064,000
Occupational Safety and Health (NIOSH):							
Research	59,950,000	60,292,000	60,292,000	60,992,000	+1,042,000	+700,000	+700,000
Training	9,718,000	6,600,000	9,718,000	10,218,000	+500,000	+3,618,000	+500,000
Subtotal, NIOSH	69,668,000	66,892,000	70,010,000	71,210,000	+1,542,000	+4,318,000	+1,200,000
National Center for Health Statistics:							
Program operations	45,432,000	45,735,000	45,735,000	45,735,000	+303,000	---	---
Program support	3,172,000	3,203,000	3,203,000	3,203,000	+31,000	---	---
Subtotal, health statistics	48,604,000	48,938,000	48,938,000	48,938,000	+334,000	---	---
Epidemic services	54,249,000	55,452,000	55,452,000	55,452,000	+1,203,000	---	---
Buildings and facilities	1,915,000	2,000,000	2,000,000	2,000,000	+85,000	---	---
Program management	3,066,000	3,095,000	3,095,000	3,095,000	+29,000	---	---
Acquired Immune Deficiency Syndrome (AIDS) 1/	304,942,000	400,719,000	408,219,000	384,419,000	+79,477,000	-16,300,000	-23,800,000
Total, Disease Control, current action	667,567,000	770,759,000	819,941,000	820,677,000	+153,110,000	+49,918,000	+736,000
(Unauthorized, not considered) by House	(152,809,000)	(153,106,000)	DEFER	(158,680,000)	(+5,871,000)	(+5,574,000)	(+158,680,000)
Total, authorized and unauthorized	(820,376,000)	(923,865,000)	(819,941,000)	(979,357,000)	(+158,981,000)	(+55,492,000)	(+159,416,000)

1/ President's budget requests AIDS funding for FY 1989 under consolidated account.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
NATIONAL INSTITUTES OF HEALTH 1/							
National Cancer Institute:							
General appropriation	1,277,877,000	1,364,617,000	1,364,617,000	1,362,117,000	+84,240,000	-2,500,000	-2,500,000
Cancer prevention and control	(69,778,000)	(71,278,000)	DEFER	---	(-69,778,000)	(-71,278,000)	---
Research training	(31,728,000)	(32,361,000)	DEFER	(103,639,000)	(+71,911,000)	(+71,278,000)	(+103,639,000)
AIDS funding	89,944,000	125,280,000	125,280,000	125,280,000	+35,336,000	---	---
Subtotal, authorized and unauthorized	1,469,327,000	1,593,536,000	1,489,897,000	1,591,036,000	+121,709,000	-2,500,000	+101,139,000
National Heart, Lung, and Blood Institute:							
General appropriation	901,269,000	975,151,000	979,951,000	976,651,000	+75,382,000	+1,500,000	-3,300,000
Research training	(39,529,000)	(40,320,000)	DEFER	(40,320,000)	(+791,000)	---	(+40,320,000)
AIDS funding	24,738,000	39,032,000	39,032,000	39,032,000	+14,294,000	---	---
Subtotal, authorized and unauthorized	965,536,000	1,054,503,000	1,018,983,000	1,056,003,000	+90,467,000	+1,500,000	+37,020,000
National Institute of Dental Research:							
General appropriation	117,865,000	121,789,000	123,789,000	121,789,000	+3,924,000	---	-2,000,000
Research training	(5,263,000)	(5,368,000)	DEFER	(7,263,000)	(+2,000,000)	(+1,895,000)	(+7,263,000)
AIDS funding	3,169,000	3,526,000	3,526,000	3,526,000	+357,000	---	---
Subtotal, authorized and unauthorized	126,297,000	130,683,000	127,315,000	132,578,000	+6,281,000	+1,895,000	+5,263,000

1/ President's budget requests AIDS funding for FY 1989 under consolidated account.

National Institute of Diabetes, Digestive, and Kidney Diseases:							
General appropriation	510,298,000	540,752,000	543,252,000	540,752,000	+30,454,000	---	-2,500,000
Research training	(21,084,000)	(21,506,000)	DEFER	(21,506,000)	(+422,000)	---	(+21,506,000)
AIDS funding	3,351,000	3,650,000	3,650,000	3,650,000	+299,000	---	---
Subtotal, authorized and unauthorized	534,733,000	565,908,000	546,902,000	565,908,000	+31,175,000	---	+19,006,000
National Institute of Neurological Disorders and Stroke:							
General appropriation	508,548,000	543,653,000	543,653,000	450,553,000	-57,995,000	-93,100,000	-93,100,000
Research training	(13,932,000)	(13,932,000)	DEFER	(13,932,000)	---	---	(+13,932,000)
AIDS funding	12,212,000	13,393,000	13,393,000	13,393,000	+1,181,000	---	---
Subtotal, authorized and unauthorized	534,692,000	570,978,000	557,046,000	477,878,000	-56,814,000	-93,100,000	-79,168,000
National Institute on Deafness and other communication disorders	---	---	---	96,100,000	+96,100,000	+96,100,000	+96,100,000
National Institute of Allergy and Infectious Diseases:							
General appropriation	402,426,000	422,185,000	422,185,000	422,185,000	+19,759,000	---	---
Research training	(12,646,000)	(12,899,000)	DEFER	(12,899,000)	(+253,000)	---	(+12,899,000)
AIDS funding	223,728,000	310,268,000	310,268,000	323,268,000	+99,540,000	+13,000,000	+13,000,000
Subtotal, authorized and unauthorized	638,800,000	745,352,000	732,453,000	758,352,000	+119,552,000	+13,000,000	+25,899,000
National Institute of General Medical Sciences:							
General appropriation	566,811,000	611,987,000	611,987,000	608,987,000	+42,176,000	-3,000,000	-3,000,000
Research training	(63,471,000)	(64,741,000)	DEFER	(70,566,000)	(+7,095,000)	(+5,825,000)	(+70,566,000)
AIDS funding	2,394,000	11,100,000	11,100,000	11,100,000	+8,706,000	---	---
Subtotal, authorized and unauthorized	632,676,000	687,828,000	623,087,000	690,653,000	+57,977,000	+2,825,000	+67,566,000
National Institute of Child Health and Human Development:							
General appropriation	368,070,000	383,207,000	387,207,000	394,207,000	+26,137,000	+11,000,000	+7,000,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Research training	(14,449,000)	(14,738,000)	DEFER	(14,738,000)	(+289,000)	---	(+14,738,000)
AIDS funding	14,292,000	20,443,000	20,443,000	22,443,000	+8,151,000	+2,000,000	+2,000,000
Subtotal, authorized and unauthorized	396,811,000	418,388,000	407,650,000	431,388,000	+34,577,000	+13,000,000	+23,738,000
National Eye Institute:							
General appropriation	215,497,000	223,288,000	223,288,000	223,538,000	+8,041,000	+250,000	+250,000
Research training	(5,620,000)	(5,733,000)	DEFER	(5,733,000)	(+113,000)	---	(+5,733,000)
AIDS funding	3,830,000	4,947,000	4,947,000	4,947,000	+1,117,000	---	---
Subtotal, authorized and unauthorized	224,947,000	233,968,000	228,235,000	234,218,000	+9,271,000	+250,000	+5,983,000
National Institute of Environmental Health Sciences:							
General appropriation	202,746,000	209,751,000	212,751,000	209,751,000	+7,005,000	---	-3,000,000
Research training	(9,003,000)	(9,183,000)	DEFER	(9,183,000)	(+180,000)	---	(+9,183,000)
AIDS funding	3,917,000	4,234,000	4,234,000	4,234,000	+317,000	---	---
Subtotal, authorized and unauthorized	215,666,000	223,168,000	216,985,000	223,168,000	+7,502,000	---	+6,183,000
National Institute on Aging:							
General appropriation	186,419,000	196,644,000	201,644,000	217,000,000	+30,581,000	+20,356,000	+15,356,000
Research training	(7,966,000)	(8,126,000)	DEFER	(8,126,000)	(+160,000)	---	(+8,126,000)
AIDS funding	361,000	452,000	452,000	452,000	+91,000	---	---
Subtotal, authorized and unauthorized	194,746,000	205,222,000	202,096,000	225,578,000	+30,832,000	+20,356,000	+23,482,000

National Institute of Arthritis and Musculoskeletal and Skin Diseases:							
General appropriation	141,277,000	152,387,000	155,487,000	155,387,000	+14,110,000	+3,000,000	-100,000
Research training	(5,742,000)	(5,857,000)	DEFER	(5,857,000)	(+115,000)	---	(+5,857,000)
AIDS funding	660,000	687,000	687,000	687,000	+27,000	---	---
Subtotal, authorized and unauthorized	147,679,000	158,931,000	156,174,000	161,931,000	+14,252,000	+3,000,000	+5,757,000
Research Resources:							
General appropriation	315,558,000	317,757,000	317,757,000	322,757,000	+7,199,000	+5,000,000	+5,000,000
Research training	(2,177,000)	(2,220,000)	DEFER	(2,220,000)	(+43,000)	---	(+2,220,000)
AIDS funding	50,418,000	38,010,000	38,010,000	43,010,000	-7,408,000	+5,000,000	+5,000,000
Subtotal, authorized and unauthorized	368,153,000	357,987,000	355,767,000	367,987,000	-166,000	+10,000,000	+12,220,000
National Center for Nursing Research:							
General appropriation	20,233,000	21,710,000	26,710,000	24,710,000	+4,477,000	+3,000,000	-2,000,000
Research training	(2,637,000)	(2,690,000)	DEFER	(2,690,000)	(+53,000)	---	(+2,690,000)
AIDS funding	510,000	707,000	707,000	707,000	+197,000	---	---
Subtotal, authorized and unauthorized	23,380,000	25,107,000	27,417,000	28,107,000	+4,727,000	+3,000,000	+690,000
John E. Fogarty International Center	11,151,000	11,338,000	11,338,000	11,738,000	+587,000	+400,000	+400,000
AIDS funding	4,500,000	4,736,000	4,736,000	4,736,000	+236,000	---	---
Subtotal	15,651,000	16,074,000	16,074,000	16,474,000	+823,000	+400,000	+400,000
National Library of Medicine:							
General appropriation	58,496,000	60,836,000	64,836,000	60,836,000	+2,340,000	---	-4,000,000
Medical library assistance	(9,414,000)	(9,790,000)	DEFER	(9,790,000)	(+376,000)	---	(+9,790,000)
Subtotal, authorized and unauthorized	67,910,000	70,626,000	64,836,000	70,626,000	+2,716,000	---	+5,790,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom- mendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Office of the Director	51,187,000	52,413,000	64,413,000	52,413,000	+1,226,000	---	-12,000,000
AIDS funding	10,632,000	7,165,000	7,165,000	7,165,000	-3,467,000	---	---
FTE Enhancement (AIDS funding)	---	---	---	6,000,000	+6,000,000	+6,000,000	+6,000,000
Subtotal	61,819,000	59,578,000	71,578,000	65,578,000	+3,759,000	+6,000,000	-6,000,000
Extramural Facilities (included in DRR) (non-add)	---	---	---	(10,000,000)	(+10,000,000)	(+10,000,000)	(+10,000,000)
Buildings and facilities	28,720,000	5,000,000	20,000,000	12,500,000	-16,220,000	+7,500,000	-7,500,000
AIDS facilities	19,150,000	---	---	---	-19,150,000	---	---
(Non-add) 2/	---	---	---	(10,000,000)	(+10,000,000)	(+10,000,000)	(+10,000,000)
Subtotal	47,870,000	5,000,000	20,000,000	12,500,000	-35,370,000	+7,500,000	-7,500,000
Subtotal, Regular appropriations	5,884,448,000	6,214,465,000	6,274,865,000	6,263,971,000	+379,523,000	+49,506,000	-10,894,000
Subtotal, unauthorized not considered by House	(314,439,000)	(320,742,000)	DEFER	(328,462,000)	(+14,023,000)	(+7,720,000)	(+328,462,000)
Subtotal, AIDS funding 1/	467,806,000	587,630,000	587,630,000	613,630,000	+145,824,000	+26,000,000	+26,000,000
Procurement reforms	---	---	---	-6,765,000	-6,765,000	-6,765,000	-6,765,000
Total, authorized and unauthorized	(6,666,693,000)	(7,122,837,000)	(6,862,495,000)	(7,199,298,000)	(+532,605,000)	(+76,461,000)	(+336,803,000)

1/ President's budget requests AIDS funding for FY 1989 under consolidated account.

2/ Derived from half of the preceeding

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH

Grants to States:							
Alcohol, Drug Abuse and Mental Health Block Grant.	(487,317,000)	(508,860,000)	DEFER	(508,860,000)	(+21,543,000)	---	(+508,860,000)
Substance Abuse Grants to States..................	(155,917,000)	(165,917,000)	DEFER	(180,000,000)	(+24,083,000)	(+14,083,000)	(+180,000,000)
Mental health state planning grants...............	4,787,000	---	---	4,787,000	---	+4,787,000	+4,787,000
Grants to States for the homeless.................	(11,489,000)	(14,300,000)	DEFER	(14,300,000)	(+2,811,000)	---	(+14,300,000)
Subtotal, Grants to States......................	4,787,000	---	---	4,787,000	---	+4,787,000	+4,787,000
Mental Health:							
Research..	253,665,000	271,767,000	276,767,000	297,044,000	+43,379,000	+25,277,000	+20,277,000
Research training.................................	(19,099,000)	(19,949,000)	DEFER	(19,949,000)	(+850,000)	---	(+19,949,000)
Clinical training.................................	16,755,000	10,000,000	10,000,000	14,500,000	-2,255,000	+4,500,000	+4,500,000
Community Support Demonstrations..................	(19,148,000)	(26,235,000)	DEFER	(26,235,000)	(+7,087,000)	---	(+26,235,000)
Homeless Services Demonstrations..................	---	(4,650,000)	DEFER	(4,650,000)	(+4,650,000)	---	(+4,650,000)
Protection and advocacy...........................	(10,555,000)	(8,000,000)	DEFER	(13,000,000)	(+2,445,000)	(+5,000,000)	(+13,000,000)
Direct operations.................................	32,521,000	32,521,000	33,521,000	32,521,000	---	---	-1,000,000
Subtotal, mental health.........................	302,941,000	314,288,000	320,288,000	344,065,000	+41,124,000	+29,777,000	+23,777,000
Drug Abuse:							
Research..	(107,904,000)	(103,895,000)	DEFER	(116,602,000)	(+8,698,000)	(+12,707,000)	(+116,602,000)
Research training.................................	(2,298,000)	(2,400,000)	DEFER	(2,400,000)	(+102,000)	---	(+2,400,000)
Direct operations.................................	(11,992,000)	(12,429,000)	DEFER	(15,229,000)	(+3,237,000)	(+2,800,000)	(+15,229,000)
Subtotal, drug abuse............................	(122,194,000)	(118,724,000)	DEFER	(134,231,000)	(+12,037,000)	(+15,507,000)	(+134,231,000)
Alcoholism:							
Research..	(74,298,000)	(83,081,000)	DEFER	(92,705,000)	(+18,407,000)	(+9,624,000)	(+92,705,000)
Alcohol services demonstration, homeless..........	---	(4,600,000)	DEFER	(4,600,000)	(+4,600,000)	---	(+4,600,000)
Research training.................................	(2,538,000)	(2,651,000)	DEFER	(2,651,000)	(+113,000)	---	(+2,651,000)
Direct operations.................................	(9,278,000)	(9,278,000)	DEFER	(9,278,000)	---	---	(+9,278,000)
Subtotal, alcoholism............................	(86,114,000)	(99,610,000)	DEFER	(109,234,000)	(+23,120,000)	(+9,624,000)	(+109,234,000)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Prevention initiative:							
Demonstrations	(23,733,000)	(16,534,000)	DEFER	(21,000,000)	(−2,733,000)	(+4,466,000)	(+21,000,000)
Direct operations	(10,465,000)	(17,730,000)	DEFER	(13,264,000)	(+2,799,000)	(−4,466,000)	(+13,264,000)
Subtotal, prevention	(34,198,000)	(34,264,000)	DEFER	(34,264,000)	(+66,000)	---	(+34,264,000)
Treatment outcome initiative	---	(2,310,000)	DEFER	(2,310,000)	(+2,310,000)	---	(+2,310,000)
Buildings and facilities	191,000	200,000	200,000	200,000	+9,000	---	---
Program management, ADAMHA	7,520,000	9,489,000	9,489,000	9,489,000	+1,969,000	---	---
Acquired Immune Deficiency Syndrome (AIDS) 1/	112,257,000	177,617,000	177,617,000	177,617,000	+65,360,000	---	---
Total, Alcohol, Drug Abuse & Mental Health	427,696,000	501,594,000	507,594,000	536,158,000	+108,462,000	+34,564,000	+28,564,000
(Unauthorized, not considered) by House	(946,031,000)	(1,002,819,000)	DEFER	(1,047,033,000)	(+101,002,000)	(+44,214,000)	(+1,047,033,000)
Total, authorized and unauthorized	(1,373,727,000)	(1,504,413,000)	(507,594,000)	(1,583,191,000)	(+209,464,000)	(+78,778,000)	(+1,075,597,000)
ST. ELIZABETH'S HOSPITAL	65,402,000	24,000,000	24,000,000	24,000,000	−41,402,000	---	---
Total, ADAMHA, authorized and unauthorized	1,439,129,000	1,528,413,000	531,594,000	1,607,191,000	+168,062,000	+78,778,000	+1,075,597,000

1/ President's budget requests AIDS funding for FY 1989 under consolidated account.

OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH

PUBLIC HEALTH SERVICE MANAGEMENT 1/

Health Services Research and Technology Assessment:							
Research..	16,624,000	16,820,000	16,820,000	17,820,000	+1,196,000	+1,000,000	+1,000,000
Trust funds..................................	(2,920,000)	(1,050,000)	(5,000,000)	(8,350,000)	(+5,630,000)	(+7,500,000)	(+3,550,000)
Program support..................................	1,632,000	1,680,000	1,680,000	1,680,000	+48,000	---	---
Subtotal including trust funds..................	21,176,000	19,550,000	23,500,000	28,050,000	+6,874,000	+8,500,000	+4,550,000
Population Affairs:							
Adolescent family life............................	(9,630,000)	(9,645,000)	DEFER	(9,645,000)	(+15,000)	---	(+9,645,000)
Health Initiatives :							
Office of Disease Prevention and Health Promotion...	3,486,000	3,000,000	4,500,000	3,486,000	---	+486,000	-1,014,000
Physical fitness and sports.......................	1,389,000	1,499,000	1,499,000	1,499,000	+110,000	---	---
Minority health...................................	2,872,000	2,872,000	2,872,000	3,000,000	+128,000	+128,000	+128,000
Health Service Management.............................	18,339,000	18,675,000	18,675,000	19,175,000	+836,000	+500,000	+500,000
Acquired Immune Deficiency Syndrome (AIDS) 1/.........	4,308,000	28,598,000	21,098,000	13,598,000	+9,290,000	-15,000,000	-7,500,000
Total, PHS management, current action...........	48,650,000	73,144,000	67,144,000	60,258,000	+11,608,000	-12,886,000	-6,886,000
(Unauthorized, not considered) by House.......	(9,630,000)	(9,645,000)	DEFER	(9,645,000)	(+15,000)	---	(+9,645,000)
Total, authorized and unauthorized.............	(58,280,000)	(82,789,000)	(67,144,000)	(69,903,000)	(+11,623,000)	(-12,886,000)	(+2,759,000)

RETIREMENT PAY AND MED. BENEFITS FOR COMM. OFFICERS

Retirement payments.................................	73,703,000	78,455,000	78,455,000	78,455,000	+4,752,000	---	---
Survivors benefits..................................	4,467,000	5,136,000	5,136,000	5,136,000	+669,000	---	---
Dependent's medical care............................	11,689,000	12,402,000	12,402,000	12,402,000	+713,000	---	---

1/ President's budget requests AIDS funding for FY 1989 under consolidated account.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −): 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Contingency	---	5,000,000	---	---	---	-5,000,000	---
Military Services Credits	---	6,694,000	6,694,000	6,694,000	+6,694,000	---	---
Total, Retirement pay and medical benefits	89,859,000	107,687,000	102,687,000	102,687,000	+12,828,000	-5,000,000	---
Total, Public Health Service, current action	8,422,247,000	9,080,529,000	9,175,015,000	9,245,101,000	+822,854,000	+164,572,000	+70,086,000
(Unauthorized, not considered)	(2,224,024,000)	(2,129,735,000)	DEFER	(2,377,620,000)	(+153,596,000)	(+247,885,000)	(+2,377,620,000)
Total, authorized and unauthorized	(10,646,271,000)	(11,210,264,000)	(9,175,015,000)	(11,622,721,000)	(+976,450,000)	(+412,457,000)	(+2,447,706,000)
HEALTH CARE FINANCING ADMINISTRATION							
GRANTS TO STATES FOR MEDICAID 1/							
Medicaid current law benefits	29,204,744,000	31,068,237,000	31,068,237,000	32,707,000,000	+3,502,256,000	+1,638,763,000	+1,638,763,000
State and local administration	1,452,188,000	1,664,352,000	1,664,352,000	1,529,000,000	+76,812,000	-135,352,000	-135,352,000
Subtotal, medicaid program level, FY 1989	30,656,932,000	32,732,589,000	32,732,589,000	34,236,000,000	+3,579,068,000	+1,503,411,000	+1,503,411,000
Less funds advanced in prior year	-7,100,000,000	-8,000,000,000	-8,000,000,000	-8,000,000,000	-900,000,000	---	---
Total, current request, FY 1989	23,556,932,000	24,732,589,000	24,732,589,000	26,236,000,000	+2,679,068,000	+1,503,411,000	+1,503,411,000
New advance, 1st quarter, FY 1990	8,000,000,000	9,000,000,000	9,000,000,000	9,000,000,000	+1,000,000,000	---	---

1/ Budget request related to FY 1990 & FY 1991 biennial budget not considered.

PAYMENTS TO HEALTH CARE TRUST FUNDS 1/							
Supplemental medical insurance	25,418,000,000	31,585,000,000	30,712,000,000	30,712,000,000	+5,294,000,000	-873,000,000	---
Hospital insurance for uninsured	461,000,000	493,000,000	493,000,000	493,000,000	+32,000,000	---	---
Federal uninsured payment	14,000,000	22,000,000	22,000,000	22,000,000	+8,000,000	---	---
Total, Payment to Trust Funds	25,893,000,000	32,100,000,000	31,227,000,000	31,227,000,000	+5,334,000,000	-873,000,000	---
PROGRAM MANAGEMENT							
Research, demonstration, and evaluation:							
Federal funds	9,574,000	11,429,000	10,000,000	10,000,000	+426,000	-1,429,000	---
Trust funds	(17,233,000)	(20,571,000)	(20,000,000)	(22,000,000)	(+4,767,000)	(+1,429,000)	(+2,000,000)
Subtotal, research, demonstration, & evaluation.	26,807,000	32,000,000	30,000,000	32,000,000	+5,193,000	---	+2,000,000
Rural hospital transition demonstrations, trust funds.	---	---	(3,000,000)	(15,000,000)	(+15,000,000)	(+15,000,000)	(+12,000,000)
Medicare Contractors (Trust Funds):							
Operating funds, current 2/	(1,126,546,000)	(1,391,000,000)	(1,291,000,000)	(1,291,000,000)	(+164,454,000)	(-100,000,000)	---
Contingency fund, general	(57,444,000)	---	(100,000,000)	(100,000,000)	(+42,556,000)	(+100,000,000)	---
Contingency fund, catastrophic insurance 2/	(47,870,000)	(112,400,000)	(112,400,000)	---	(-47,870,000)	(-112,400,000)	(-112,400,000)
Subtotal, contingency	(105,314,000)	(112,400,000)	(212,400,000)	(100,000,000)	(-5,314,000)	(-12,400,000)	(-112,400,000)
Operating funds, catastrophic insurance	---	---	---	(160,000,000)	(+160,000,000)	(+160,000,000)	(+160,000,000)
Subtotal, Contractors	(1,231,860,000)	(1,503,400,000)	(1,503,400,000)	(1,551,000,000)	(+319,140,000)	(+47,600,000)	(+47,600,000)
Less P.L. 99-272 funds (COBRA)	(-105,000,000)	---	---	---	(+105,000,000)	---	---
State Certification:							
Medicare certification, trust funds	(57,922,000)	(62,235,000)	(62,235,000)	(66,235,000)	(+8,313,000)	(+4,000,000)	(+4,000,000)
General program support, federal funds	7,937,000	3,624,000	3,624,000	4,224,000	-3,713,000	+600,000	+600,000
Subtotal, State certification	(65,859,000)	(65,859,000)	(65,859,000)	(70,459,000)	(+4,600,000)	(+4,600,000)	(+4,600,000)

1/ Budget request related to FY 1990 & FY 1991 biennial budget not considered.

2/ Proposed for later transmittal in Pres. Budget.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or −) 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Federal Administration:							
Federal funds	82,257,000	81,750,000	81,750,000	81,750,000	-507,000	---	---
Less user fees	-1,557,000	-1,557,000	-1,557,000	-1,557,000	---	---	---
Trust funds	(171,570,000)	(189,350,000)	(181,284,000)	(185,584,000)	(+14,014,000)	(-3,766,000)	(+4,300,000)
Subtotal, Federal Administration	252,270,000	269,543,000	261,477,000	265,777,000	+13,507,000	-3,766,000	+4,300,000
Total, Program management	1,471,796,000	1,870,802,000	1,863,736,000	1,934,236,000	+462,440,000	+63,434,000	+70,500,000
Federal funds	98,211,000	95,246,000	93,817,000	94,417,000	-3,794,000	-829,000	+600,000
Trust funds	(1,373,585,000)	(1,775,556,000)	(1,769,919,000)	(1,839,819,000)	(+466,234,000)	(+64,263,000)	(+69,900,000)
Total, Health Care Financing Administration:							
Federal funds	57,548,143,000	65,927,835,000	65,053,406,000	66,557,417,000	+9,009,274,000	+629,582,000	+1,504,011,000
Current year, FY 1989	(49,548,143,000)	(56,927,835,000)	(56,053,406,000)	(57,557,417,000)	(+8,009,274,000)	(+629,582,000)	(+1,504,011,000)
New advance, 1st quarter, FY 1990	(8,000,000,000)	(9,000,000,000)	(9,000,000,000)	(9,000,000,000)	(+1,000,000,000)	---	---
Trust funds	(1,373,585,000)	(1,775,556,000)	(1,769,919,000)	(1,839,819,000)	(+466,234,000)	(+64,263,000)	(+69,900,000)

SOCIAL SECURITY ADMINISTRATION

PAYMENTS TO SOCIAL SECURITY TRUST FUNDS 1/............	105,298,000	93,631,000	93,631,000	93,631,000	-11,667,000	---	---
SPECIAL BENEFITS FOR DISABLED COAL MINERS 1/							
Benefit payments....................................	909,416,000	871,901,000	871,901,000	871,901,000	-37,515,000	---	---
Administration......................................	6,486,000	6,680,000	6,680,000	6,680,000	+194,000	---	---
Subtotal, Black Lung, FY 1989 program level.....	915,902,000	878,581,000	878,581,000	878,581,000	-37,321,000	---	---
Less funds advanced in prior year...............	-252,450,000	-250,000,000	-250,000,000	-250,000,000	+2,450,000	---	---
Total, Black Lung, current request, FY 1989.....	663,452,000	628,581,000	628,581,000	628,581,000	-34,871,000	---	---
New advance, 1st quarter, FY 1990...............	250,000,000	211,000,000	211,000,000	211,000,000	-39,000,000	---	---
SUPPLEMENTAL SECURITY INCOME 1/							
Federal benefit payments............................	11,378,956,000	11,368,000,000	11,368,000,000	11,368,000,000	-10,956,000	---	---
Beneficiary services................................	12,474,000	13,547,000	13,547,000	13,547,000	+1,073,000	---	---
Research demonstration..............................	275,000	2,275,000	2,275,000	2,275,000	+2,000,000	---	---
Administration......................................	1,080,184,000	1,090,131,000	1,090,131,000	1,090,131,000	+9,947,000	---	---
FY 1986 & 1987 shortfall, federal administrative costs	99,451,000	---	---	---	-99,451,000	---	---
Subtotal, SSI FY 1989 program level.............	12,571,340,000	12,473,953,000	12,473,953,000	12,473,953,000	-97,387,000	---	---
Less funds advanced in prior year...............	-2,765,000,000	-3,000,000,000	-3,000,000,000	-3,000,000,000	-235,000,000	---	---
Total, SSI, current request, FY 1989............	9,806,340,000	9,473,953,000	9,473,953,000	9,473,953,000	-332,387,000	---	---
New advance, 1st quarter, FY 1990.............	3,000,000,000	2,936,000,000	2,936,000,000	2,936,000,000	-64,000,000	---	---
LIMITATION ON ADMINISTRATIVE EXPENSES (Trust Funds)...	3,524,114,000	3,775,661,000	3,705,000,000	3,820,000,000	+295,886,000	+44,339,000	+115,000,000
Contingency reserve (non-add).....................	(47,870,000)	(47,870,000)	(97,870,000)	(97,870,000)	(+50,000,000)	(+50,000,000)	---

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1/ Budget request related to FY 1990 & FY 1991 biennial budget not considered.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item	1988 appropriation	Budget estimate	House allowance	Committee recom-mendation	Senate committee recommendation compared with (+ or −)		
					1988 appropriation	Budget estimate	House allowance
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Total, Social Security Administration:							
Federal funds	13,825,090,000	13,343,165,000	13,343,165,000	13,343,165,000	-481,925,000	---	---
Current year FY 1989	(10,575,090,000)	(10,196,165,000)	(10,196,165,000)	(10,196,165,000)	(-378,925,000)	---	---
New advances, 1st quarter FY 1990	(3,250,000,000)	(3,147,000,000)	(3,147,000,000)	(3,147,000,000)	(-103,000,000)	---	---
Trust funds	(3,524,114,000)	(3,775,661,000)	(3,705,000,000)	(3,820,000,000)	(+295,886,000)	(+44,339,000)	(+115,000,000)
FAMILY SUPPORT ADMINISTRATION							
FAMILY SUPPORT PAYMENTS TO STATES 3/							
Aid to Families with Dependent Children (AFDC) 2/	9,624,132,000	8,618,569,000	8,618,569,000	8,967,769,000	-656,363,000	+349,200,000	+349,200,000
Payments to territories	13,368,000	13,368,000	13,368,000	13,368,000	---	---	---
Emergency assistance and repatriation	100,000,000	124,000,000	124,000,000	124,000,000	+24,000,000	---	---
State and local welfare administration	1,045,500,000	1,186,200,000	1,186,200,000	1,186,200,000	+140,700,000	---	---
Legislative savings (proposed for later transmittal):							
Recipient training	---	(505,000,000)	DEFER	---	---	(-505,000,000)	---
Offsetting savings	---	(-137,000,000)	DEFER	---	---	(+137,000,000)	---
Subtotal, legislation 1/	---	(368,000,000)	DEFER	---	---	(-368,000,000)	---
Subtotal, Welfare payments	10,783,000,000	9,942,137,000	9,942,137,000	10,291,337,000	-491,663,000	+349,200,000	+349,200,000

1/ President's budget treats as discretionary.

2/ President's budget assumes $349.2 savings from quality control.

3/ Budget request related to FY 1990 & FY 1991 biennial budget not considered.

Child Support Enforcement:							
State and local administration	772,000,000	900,000,000	900,000,000	900,000,000	+128,000,000	---	---
Federal incentive payments	216,000,000	270,000,000	270,000,000	270,000,000	+54,000,000	---	---
Less federal share collections	-646,000,000	-757,000,000	-757,000,000	-757,000,000	-111,000,000	---	---
Subtotal, Child support	342,000,000	413,000,000	413,000,000	413,000,000	+71,000,000	---	---
Total, Payments, FY 1989 program level	11,125,000,000	10,355,137,000	10,355,137,000	10,704,337,000	-420,663,000	+349,200,000	+349,200,000
Less funds advanced in previous years	-2,480,615,000	-2,500,000,000	-2,500,000,000	-2,500,000,000	-19,385,000	---	---
Total, Payments, current request, FY 1989	8,644,385,000	7,855,137,000	7,855,137,000	8,204,337,000	-440,048,000	+349,200,000	+349,200,000
(Unauthorized, not considered) by House	---	(368,000,000)	DEFER	---	---	(-368,000,000)	---
Total, authorized and unauthorized	(8,644,385,000)	(8,223,137,000)	(7,855,137,000)	(8,204,337,000)	(-440,048,000)	(-18,800,000)	(+349,200,000)
New advance, 1st quarter, FY 1990	2,500,000,000	2,644,000,000	2,644,000,000	2,700,000,000	+200,000,000	+56,000,000	+56,000,000
LOW INCOME HOME ENERGY ASSISTANCE							
Energy Assistance Block Grant	1,531,840,000	1,187,000,000	1,567,000,000	1,187,000,000	-344,840,000	---	-380,000,000
REFUGEE AND ENTRANT ASSISTANCE 2/							
Cash and medical assistance 3/	(207,043,000)	(182,189,000)	DEFER	(286,341,000)	(+79,298,000)	(+104,152,000)	(+286,341,000)
State administration	(26,231,000)	(21,569,000)	DEFER	---	(-26,231,000)	(-21,569,000)	---
Social services	(65,694,000)	(30,000,000)	DEFER	(65,694,000)	---	(+35,694,000)	(+65,694,000)
Voluntary agency program	(7,659,000)	(7,659,000)	DEFER	(7,659,000)	---	---	(+7,659,000)
Preventive health	(5,840,000)	(3,000,000)	DEFER	(5,840,000)	---	(+2,840,000)	(+5,840,000)
Targeted assistance	(34,466,000)	(34,466,000)	DEFER	(34,466,000)	---	---	(+34,466,000)
Total, Refugee Resettlement, not considered by House	(346,933,000)	(278,883,000)	DEFER	(400,000,000)	(+53,067,000)	(+121,117,000)	(+400,000,000)

2/ State legalization payment of $1 billion is a permanent appropriation.

3/ Senate recommendation includes $42,000,000 for State administration, consolidated with cash and medical assistance activity.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recom-mendation (5)	Senate committee recommendation compared with (+ or –) 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
WORK INCENTIVES							
Grants to States	(92,551,000)	---	DEFER	(92,551,000)	---	(+92,551,000)	(+92,551,000)
COMMUNITY SERVICES BLOCK GRANT							
Grants to States for Community Services	325,516,000	282,100,000	315,000,000	344,664,000	+19,148,000	+62,564,000	+29,664,000
Grants to States for services to the homeless	(19,148,000)	---	DEFER	---	(-19,148,000)	---	---
Discretionary funds:							
Consolidated request	---	27,900,000	---	---	---	-27,900,000	---
Community economic development	18,909,000	---	20,000,000	21,000,000	+2,091,000	+21,000,000	+1,000,000
Rural housing	3,925,000	---	3,925,000	4,200,000	+275,000	+4,200,000	+275,000
Farmworker assistance	2,968,000	---	2,968,000	3,000,000	+32,000	+3,000,000	+32,000
National youth sports	6,319,000	---	7,000,000	6,500,000	+181,000	+6,500,000	-500,000
Technical assistance	239,000	---	239,000	---	-239,000	---	-239,000
Subtotal, discretionary funds	32,360,000	27,900,000	34,132,000	34,700,000	+2,340,000	+6,800,000	+568,000
Community Partnerships	2,872,000	---	2,872,000	4,000,000	+1,128,000	+4,000,000	+1,128,000
Community Food and Nutrition	2,394,000	---	2,394,000	2,500,000	+106,000	+2,500,000	+106,000
Total, Community services	363,142,000	310,000,000	354,398,000	385,864,000	+22,722,000	+75,864,000	+31,466,000
(Unauthorized, not considered)	(19,148,000)	---	DEFER	---	(-19,148,000)	---	---

PROGRAM ADMINISTRATION							
Federal Administration..............................	79,464,000	79,533,000	79,533,000	82,464,000	+3,000,000	+2,931,000	+2,931,000
Total, Family Support Administration............	13,118,831,000	12,075,670,000	12,500,068,000	12,559,665,000	-559,166,000	+483,995,000	+59,597,000
Current year FY 1989..........................	(10,618,831,000)	(9,431,670,000)	(9,856,068,000)	(9,859,665,000)	(-759,166,000)	(+427,995,000)	(+3,597,000)
New advance, 1st quarter, FY 1990............	(2,500,000,000)	(2,644,000,000)	(2,644,000,000)	(2,700,000,000)	(+200,000,000)	(+56,000,000)	(+56,000,000)
(Unauthorized, not considered by House......	(458,632,000)	(646,883,000)	DEFER	(492,551,000)	(+33,919,000)	(-154,332,000)	(+492,551,000)
Total, authorized and unauthorized.............	(13,577,463,000)	(12,722,553,000)	(12,500,068,000)	(13,052,216,000)	(-525,247,000)	(+329,663,000)	(+552,148,000)
ASSISTANT SECRETARY FOR HUMAN DEVELOPMENT SERVICES							
SOCIAL SERVICES BLOCK GRANT (TITLE XX)................	2,700,000,000	2,700,000,000	2,700,000,000	2,700,000,000	---	---	---
HUMAN DEVELOPMENT SERVICES							
Programs for Children, Youth, and Families:							
Head start...	1,206,324,000	1,206,324,000	1,250,000,000	1,250,000,000	+43,676,000	+43,676,000	---
Comprehensive child development centers...........	---	---	20,000,000	20,000,000	+20,000,000	+20,000,000	---
Child abuse :							
State grants..................................	11,489,000	11,489,000	12,000,000	12,000,000	+511,000	+511,000	---
Discretionary activities......................	13,306,000	13,306,000	13,306,000	13,898,000	+592,000	+592,000	+592,000
Challenge grants..............................	4,787,000	4,787,000	4,787,000	5,000,000	+213,000	+213,000	+213,000
Subtotal, child abuse.........................	29,582,000	29,582,000	30,093,000	30,898,000	+1,316,000	+1,316,000	+805,000
Child development associate scholarships..........	1,436,000	1,436,000	1,436,000	1,500,000	+64,000	+64,000	+64,000
Runaway youth......................................	(26,089,000)	(26,089,000)	DEFER	(27,250,000)	(+1,161,000)	(+1,161,000)	(+27,250,000)
Dependent Care Planning and Development...........	8,377,000	8,377,000	8,377,000	8,750,000	+373,000	+373,000	+373,000
Family violence....................................	8,138,000	8,138,000	8,138,000	8,500,000	+362,000	+362,000	+362,000
Temporary childcare/crisis nurseries..............	(4,787,000)	(4,787,000)	DEFER	(5,000,000)	(+213,000)	(+213,000)	(+5,000,000)
Child welfare assistance..........................	239,350,000	239,350,000	249,350,000	250,000,000	+10,650,000	+10,650,000	+650,000
Child welfare training............................	3,660,000	3,660,000	3,660,000	3,823,000	+163,000	+163,000	+163,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
Adoption opportunities	4,787,000	4,787,000	4,787,000	5,000,000	+213,000	+213,000	+213,000
Child welfare research	10,857,000	10,857,000	10,857,000	11,340,000	+483,000	+483,000	+483,000
Subtotal, Children, Youth & Families	1,512,511,000	1,512,511,000	1,586,698,000	1,589,811,000	+77,300,000	+77,300,000	+3,113,000
(Unauthorized, not considered)	(30,876,000)	(30,876,000)	DEFER	(32,250,000)	(+1,374,000)	(+1,374,000)	(+32,250,000)
Programs for the Aging:							
Grants to States:							
Supportive Services and Centers	268,072,000	268,072,000	278,000,000	280,000,000	+11,928,000	+11,928,000	+2,000,000
Ombudsman activities	957,000	957,000	957,000	1,000,000	+43,000	+43,000	+43,000
Nutrition:							
Congregate meals	344,664,000	344,664,000	362,000,000	360,000,000	+15,336,000	+15,336,000	-2,000,000
Home-delivered meals	75,635,000	75,635,000	80,000,000	79,000,000	+3,365,000	+3,365,000	-1,000,000
Research, training, and special projects	23,935,000	23,935,000	23,935,000	25,000,000	+1,065,000	+1,065,000	+1,065,000
Federal Council on Aging	191,000	180,000	180,000	200,000	+9,000	+20,000	+20,000
Grants to Indians	7,181,000	7,181,000	7,181,000	7,500,000	+319,000	+319,000	+319,000
Frail elderly in-home services	4,787,000	4,787,000	4,787,000	5,000,000	+213,000	+213,000	+213,000
Subtotal, Aging programs	725,422,000	725,411,000	757,040,000	757,700,000	+32,278,000	+32,289,000	+660,000
Developmental disabilities program:							
State grants	58,401,000	58,401,000	58,401,000	61,000,000	+2,599,000	+2,599,000	+2,599,000
Protection and advocacy	19,148,000	19,148,000	19,148,000	20,000,000	+852,000	+852,000	+852,000
Developmental disabilities special projects	2,872,000	2,872,000	2,872,000	3,000,000	+128,000	+128,000	+128,000

University affiliated facilities..................	12,446,000	12,446,000	12,446,000	13,000,000	+554,000	+554,000	+554,000
Subtotal, Developmental disabilities............	92,867,000	92,867,000	92,867,000	97,000,000	+4,133,000	+4,133,000	+4,133,000
Native American Programs..............................	29,679,000	29,679,000	29,679,000	31,000,000	+1,321,000	+1,321,000	+1,321,000
Human services research, training & demonstration:							
New consolidated request (non-add)................	---	(76,650,000)	---	---	---	(-76,650,000)	---
Program direction....................................	64,177,000	65,524,000	65,524,000	65,704,000	+1,527,000	+180,000	+180,000
Total, Human Development Services, current action..	2,424,656,000	2,425,992,000	2,531,808,000	2,541,215,000	+116,559,000	+115,223,000	+9,407,000
(Unauthorized, not considered) by House.....	(30,876,000)	(30,876,000)	DEFER	(32,250,000)	(+1,374,000)	(+1,374,000)	(+32,250,000)
Total, authorized and unauthorized..............	(2,455,532,000)	(2,456,868,000)	(2,531,808,000)	(2,573,465,000)	(+117,933,000)	(+116,597,000)	(+41,657,000)
FAMILY SOCIAL SERVICES							
Foster care 1/...	658,178,000	940,971,000	940,971,000	940,971,000	+282,793,000	---	---
Adoption assistance 1/...............................	108,000,000	133,936,000	133,936,000	133,936,000	+25,936,000	---	---
Independent living....................................	(45,000,000)	---	DEFER	(45,000,000)	---	(+45,000,000)	(+45,000,000)
Total, Family Social Services.....................	766,178,000	1,074,907,000	1,074,907,000	1,074,907,000	+308,729,000	---	---
Total, Asst. Sec. for Human Development.........	5,890,834,000	6,200,899,000	6,306,715,000	6,316,122,000	+425,288,000	+115,223,000	+9,407,000
(Unauthorized, not considered) by House.......	(75,876,000)	(30,876,000)	DEFER	(77,250,000)	(+1,374,000)	(+46,374,000)	(+77,250,000)
Total, authorized and unauthorized..............	(5,966,710,000)	(6,231,775,000)	(6,306,715,000)	(6,393,372,000)	(+426,662,000)	(+161,597,000)	(+86,657,000)

1/ FY 1989 request includes funds for prior year claims.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −) 1988 appropriation (6)	Senate committee recommendation compared with (+ or −) Budget estimate (7)	Senate committee recommendation compared with (+ or −) House allowance (8)
DEPARTMENTAL MANAGEMENT							
GENERAL DEPARTMENTAL MANAGEMENT:							
Federal funds	63,532,000	68,160,000	68,160,000	64,860,000	+1,328,000	-3,300,000	-3,300,000
Cancer center construction	4,308,000	---	---	---	-4,308,000	---	---
Trust funds	(6,702,000)	(7,000,000)	(7,000,000)	(7,000,000)	(+298,000)	---	---
Total, Departmental management	74,542,000	75,160,000	75,160,000	71,860,000	-2,682,000	-3,300,000	-3,300,000
OFFICE OF THE INSPECTOR GENERAL:							
Federal funds	35,769,000	46,430,000	46,430,000	46,430,000	+10,661,000	---	---
Trust funds	(38,296,000)	(40,000,000)	(40,000,000)	(40,000,000)	(+1,704,000)	---	---
Total, Inspector General	74,065,000	86,430,000	86,430,000	86,430,000	+12,365,000	---	---
OFFICE FOR CIVIL RIGHTS:							
Federal funds	16,343,000	16,173,000	16,173,000	16,173,000	-170,000	---	---
Trust funds	(3,830,000)	(4,000,000)	(4,000,000)	(4,000,000)	(+170,000)	---	---
Total, Civil Rights	20,173,000	20,173,000	20,173,000	20,173,000	---	---	---
POLICY RESEARCH	4,873,000	5,019,000	8,373,000	7,519,000	+2,646,000	+2,500,000	-854,000
Total, Departmental management:							
Federal funds	124,825,000	135,782,000	139,136,000	134,982,000	+10,157,000	-800,000	-4,154,000

Trust funds	(48,828,000)	(51,000,000)	(51,000,000)	(51,000,000)	(+2,172,000)	---	---
Total, Department of Health and Human Services:							
Federal Funds (all years), current action	98,929,970,000	106,763,880,000	106,517,505,000	108,156,452,000	+9,226,482,000	+1,392,572,000	+1,638,947,000
Current year FY 1989	(85,179,970,000)	(91,972,880,000)	(91,726,505,000)	(93,309,452,000)	(+8,129,482,000)	(+1,336,572,000)	(+1,582,947,000)
New advances, 1st quarter, FY 1990	(13,750,000,000)	(14,791,000,000)	(14,791,000,000)	(14,847,000,000)	(+1,097,000,000)	(+56,000,000)	(+56,000,000)
(Unauthorized, not considered) by House.	(2,758,532,000)	(2,807,494,000)	DEFER	(2,947,421,000)	(+188,889,000)	(+139,927,000)	(+2,947,421,000)
Total, authorized and unauthorized	(101,688,502,000)	(109,571,374,000)	(106,517,505,000)	(111,103,873,000)	(+9,415,371,000)	(+1,532,499,000)	(+4,586,368,000)
Trust funds	(4,949,447,000)	(5,603,267,000)	(5,530,919,000)	(5,719,369,000)	(+769,922,000)	(+116,102,000)	(+188,450,000)

TITLE III--DEPARTMENT OF EDUCATION

COMPENSATORY EDUCATION FOR THE DISADVANTAGED

Grants for the Disadvantaged (Chapter 1):							
Grants to local educational agencies:							
Basic grants	3,829,600,000	3,900,000,000	3,900,000,000	3,900,000,000	+70,400,000	---	---
Concentration grants	---	158,365,000	200,000,000	175,000,000	+175,000,000	+16,635,000	-25,000,000
Capital expenses	---	---	30,000,000	---	---	---	-30,000,000
Even start	---	---	25,000,000	---	---	---	-25,000,000
State agency programs:							
Migrant	269,029,000	269,029,000	269,029,000	275,000,000	+5,971,000	+5,971,000	+5,971,000
Handicapped	151,269,000	151,269,000	151,269,000	150,000,000	-1,269,000	-1,269,000	-1,269,000
Neglected and delinquent	32,552,000	32,616,000	32,616,000	32,000,000	-552,000	-616,000	-616,000
State administration	38,296,000	42,050,000	42,050,000	41,000,000	+2,704,000	-1,050,000	-1,050,000
State program improvement	---	4,755,000	5,755,000	4,800,000	+4,800,000	+45,000	-955,000
Evaluation and technical assistance	7,181,000	8,000,000	8,000,000	8,000,000	+819,000	---	---
Rural Educational opportunities	---	---	---	4,000,000	+4,000,000	+4,000,000	+4,000,000
Total, Chapter 1	4,327,927,000	4,566,084,000	4,663,719,000	4,589,800,000	+261,873,000	+23,716,000	-73,919,000
Migrant education:							
High school equivalency program	7,276,000	---	7,500,000	7,276,000	---	+7,276,000	-224,000
College assistance migrant program	1,340,000	---	1,400,000	1,500,000	+160,000	+1,500,000	+100,000
Total, Compensatory Education programs	4,336,543,000	4,566,084,000	4,672,619,000	4,598,576,000	+262,033,000	+32,492,000	-74,043,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −) 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
IMPACT AID							
Maintenance and operations:							
Payments for 'a' children	536,144,000	547,000,000	553,000,000	565,000,000	+28,856,000	+18,000,000	+12,000,000
Payments for 'b' children	134,036,000	---	137,000,000	134,036,000	---	+134,036,000	-2,964,000
Payments for Federal property (Section 2)	15,318,000	10,000,000	15,000,000	15,000,000	-318,000	+5,000,000	---
Subtotal	685,498,000	557,000,000	705,000,000	714,036,000	+28,538,000	+157,036,000	+9,036,000
Disaster assistance (Section 7)	---	10,000,000	10,000,000	---	---	-10,000,000	-10,000,000
Construction	22,978,000	25,000,000	25,000,000	25,000,000	+2,022,000	---	---
Total, Impact aid	708,476,000	592,000,000	740,000,000	739,036,000	+30,560,000	+147,036,000	-964,000
SCHOOL IMPROVEMENT PROGRAMS							
Educational improvement partnerships (Chapter 2):							
State Block Grants	478,700,000	540,500,000	489,500,000	473,700,000	-5,000,000	-66,800,000	-15,800,000
National programs:							
Inexpensive book distribution (including RIF)	7,659,000	8,200,000	8,500,000	8,500,000	+841,000	+300,000	---
Arts in education	3,315,000	3,500,000	3,500,000	3,500,000	+185,000	---	---
Law - related education	3,830,000	3,200,000	3,830,000	3,200,000	-630,000	---	-630,000
National school volunteer program	383,000	---	---	1,000,000	+617,000	+1,000,000	+1,000,000
National Diffusion Network	10,244,000	11,200,000	11,200,000	11,200,000	+956,000	---	---

Blue ribbon schools	---	900,000	900,000	900,000	+900,000	---	---
Subtotal, National programs	25,431,000	27,000,000	27,930,000	28,300,000	+2,869,000	+1,300,000	+370,000
Total, Chapter 2	504,131,000	567,500,000	517,430,000	502,000,000	-2,131,000	-65,500,000	-15,430,000
Fund for innovation in education	4,308,000	4,570,000	8,570,000	5,000,000	+692,000	+430,000	-3,570,000
(Transfer of funds) (non-add)	---	---	(4,520,000)	(4,520,000)	(+4,520,000)	(+4,520,000)	---
Technology education (non-add)	---	---	---	(1,000,000)	(+1,000,000)	(+1,000,000)	(+1,000,000)
Drug - free schools and communities:							
State grants	191,480,000	207,000,000	207,000,000	207,000,000	+15,520,000	---	---
National programs	38,296,000	43,000,000	43,000,000	43,000,000	+4,704,000	---	---
Subtotal, Drug - free schools & communities	229,776,000	250,000,000	250,000,000	250,000,000	+20,224,000	---	---
Other school improvement programs:							
Christa McAuliffe fellowships	1,915,000	1,915,000	1,915,000	1,915,000	---	---	---
Mathematics and science education	119,675,000	119,675,000	119,675,000	139,000,000	+19,325,000	+19,325,000	+19,325,000
Training and advisory services (Civil Rights IV-A)	23,456,000	23,456,000	23,456,000	24,000,000	+544,000	+544,000	+544,000
Follow through	7,133,000	---	7,700,000	7,000,000	-133,000	+7,000,000	-700,000
Territorial teacher training	1,915,000	1,915,000	1,915,000	2,000,000	+85,000	+85,000	+85,000
General assistance to the Virgin Islands	4,787,000	---	4,787,000	4,787,000	---	+4,787,000	---
Ellender fellowships	2,394,000	---	3,000,000	2,500,000	+106,000	+2,500,000	-500,000
Older Americans and recent Imigrants	---	---	---	1,000,000	+1,000,000	+1,000,000	+1,000,000
Women's educational equity	3,351,000	---	3,351,000	2,620,000	-731,000	+2,620,000	-731,000
Magnet schools assistance	71,805,000	115,000,000	115,000,000	115,000,000	+43,195,000	---	---
Leadership in Educational Administration (LEAD)	8,222,000	4,358,000	4,358,000	4,358,000	-3,864,000	---	---
Dropout prevention demonstrations	23,935,000	21,446,000	21,446,000	22,000,000	-1,935,000	+554,000	+554,000
Native Hawaiian Education Act	---	---	---	6,000,000	+6,000,000	+6,000,000	+6,000,000
Education of homeless children & youth	4,787,000	---	4,787,000	5,000,000	+213,000	+5,000,000	+213,000
Star schools	19,148,000	---	19,148,000	10,000,000	-9,148,000	+10,000,000	-9,148,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item	1988 appropriation	Budget estimate	House allowance	Committee recom-mendation	Senate committee recommendation compared with (+ or -)		
					1988 appropriation	Budget estimate	House allowance
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Fund for the improvement and reform of schools and teaching:							
Grants for schools and teachers	---	8,000,000	8,000,000	---	---	-8,000,000	-8,000,000
Family-school partnerships	---	4,000,000	4,000,000	---	---	-4,000,000	-4,000,000
Subtotal	---	12,000,000	12,000,000	---	---	-12,000,000	-12,000,000
Alternative curriculum schools	---	5,000,000	---	---	---	-5,000,000	---
Total, School improvement programs	1,030,738,000	1,126,835,000	1,118,538,000	1,104,180,000	+73,442,000	-22,655,000	-14,358,000
BILINGUAL, IMMIGRANT, & REFUGEE EDUCATION							
Bilingual programs	101,198,000	112,106,000	112,106,000	112,106,000	+10,908,000	---	---
Support services	9,928,000	10,903,000	10,903,000	10,903,000	+975,000	---	---
Training grants	35,447,000	33,564,000	33,564,000	28,000,000	-7,447,000	-5,564,000	-5,564,000
Immigrant education	28,722,000	28,722,000	30,000,000	30,000,000	+1,278,000	+1,278,000	---
Reappropriation	1,247,000	---	---	---	-1,247,000	---	---
Refugee education	15,209,000	15,209,000	15,209,000	16,000,000	+791,000	+791,000	+791,000
Total	191,751,000	200,504,000	201,782,000	197,009,000	+5,258,000	-3,495,000	-4,773,000

EDUCATION FOR THE HANDICAPPED

Education for the handicapped:							
State grants:							
Grants to States, general	1,431,737,000	1,474,239,000	1,478,539,000	1,508,200,000	+76,463,000	+33,961,000	+29,661,000
Preschool grants	201,054,000	205,075,000	205,075,000	250,000,000	+48,946,000	+44,925,000	+44,925,000
Grants for infants and families	67,018,000	68,358,000	68,358,000	73,000,000	+5,982,000	+4,642,000	+4,642,000
Special purpose funds:							
Deaf-blind and other severely handicapped projects	---	19,722,000	---	---	---	-19,722,000	---
Deaf-blind projects	14,361,000	---	14,361,000	14,361,000	---	+14,361,000	---
Severely handicapped projects	5,361,000	---	5,361,000	5,361,000	---	+5,361,000	---
Early childhood education	23,428,000	23,428,000	23,428,000	23,428,000	---	---	---
Special education technology	4,787,000	4,787,000	4,787,000	10,000,000	+5,213,000	+5,213,000	+5,213,000
Secondary and transitional services	7,372,000	7,372,000	7,372,000	7,372,000	---	---	---
Postsecondary programs	5,840,000	5,840,000	5,840,000	5,840,000	---	---	---
Innovation and development	17,233,000	17,233,000	17,233,000	17,233,000	---	---	---
Media and captioning services	13,216,000	13,216,000	13,916,000	13,216,000	---	---	-700,000
Regional resource centers	6,415,000	6,415,000	6,415,000	6,415,000	---	---	---
Recruitment and information clearinghouses	1,149,000	1,149,000	1,149,000	1,149,000	---	---	---
Special education personnel development	66,410,000	66,410,000	66,410,000	69,410,000	+3,000,000	+3,000,000	+3,000,000
Special studies	3,638,000	3,638,000	3,638,000	3,638,000	---	---	---
Total, Education for the handicapped	1,869,019,000	1,916,882,000	1,921,882,000	2,008,623,000	+139,604,000	+91,741,000	+86,741,000

REHABILITATION SERVICES AND HANDICAPPED RESEARCH

Rehabilitation services: State grants:							
Vocational rehabilitation State grants	1,379,500,000	1,407,090,000	1,441,577,000	1,450,000,000	+70,500,000	+42,910,000	+8,423,000
Supported employment State grants	25,935,000	26,454,000	26,454,000	28,000,000	+2,065,000	+1,546,000	+1,546,000
Client assistance	7,500,000	7,650,000	7,650,000	7,900,000	+400,000	+250,000	+250,000
Service and demonstration projects:							
Special demonstration programs	16,590,000	16,590,000	16,590,000	17,200,000	+610,000	+610,000	+610,000
Supported employment projects	9,520,000	9,520,000	9,520,000	9,520,000	---	---	---
Model transition grants	475,000	475,000	475,000	475,000	---	---	---
Recreational programs	2,470,000	---	2,620,000	2,500,000	+30,000	+2,500,000	-120,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −)		
					1988 appropriation (6)	Budget estimate . (7)	House allowance (8)
Migratory workers	1,100,000	1,100,000	1,100,000	1,100,000	---	---	---
Projects with industry	17,000,000	17,000,000	17,000,000	17,700,000	+700,000	+700,000	+700,000
Subtotal, Service and demonstration projects	47,155,000	44,685,000	47,305,000	48,495,000	+1,340,000	+3,810,000	+1,190,000
Helen Keller National Center	4,800,000	4,800,000	5,000,000	4,800,000	---	---	-200,000
Independent living:							
Comprehensive services	12,310,000	12,556,000	12,556,000	12,800,000	+490,000	+244,000	+244,000
Centers	25,500,000	25,500,000	25,500,000	26,500,000	+1,000,000	+1,000,000	+1,000,000
Services for older blind	5,600,000	5,600,000	5,600,000	5,800,000	+200,000	+200,000	+200,000
Subtotal, Independent living	43,410,000	43,656,000	43,656,000	45,100,000	+1,690,000	+1,444,000	+1,444,000
Training	30,000,000	30,000,000	30,000,000	31,000,000	+1,000,000	+1,000,000	+1,000,000
National Institute on Disability and Rehab Research	51,100,000	51,100,000	53,950,000	53,100,000	+2,000,000	+2,000,000	-850,000
Evaluation	1,000,000	1,000,000	1,000,000	1,000,000	---	---	---
Total, Rehabilitation services & handicapped res	1,590,400,000	1,616,435,000	1,656,592,000	1,669,395,000	+78,995,000	+52,960,000	+12,803,000
VOCATIONAL AND ADULT EDUCATION							
Vocational education:							
Basic grants	804,216,000	848,333,000	848,333,000	835,000,000	+30,784,000	-13,333,000	-13,333,000
National programs	25,658,000	24,911,000	25,658,000	26,800,000	+1,142,000	+1,889,000	+1,142,000

Consumer and homemaking education	32,791,000	---	32,791,000	34,250,000	+1,459,000	+34,250,000	+1,459,000
State councils	7,851,000	7,851,000	7,851,000	8,000,000	+149,000	+149,000	+149,000
Community - based organizations	6,845,000	---	6,845,000	9,000,000	+2,155,000	+9,000,000	+2,155,000
Bilingual vocational training	3,734,000	---	3,734,000	3,900,000	+166,000	+3,900,000	+166,000
Subtotal, Vocational education	881,095,000	881,095,000	925,212,000	916,950,000	+35,855,000	+35,855,000	-8,262,000
Adult education: 1/							
Grants to States	115,367,000	148,000,000	148,000,000	138,000,000	+22,633,000	-10,000,000	-10,000,000
National programs	1,915,000	2,000,000	2,000,000	2,000,000	+85,000	---	---
Literacy training for homeless adults	7,180,000	---	7,180,000	7,180,000	---	+7,180,000	---
Workplace literacy partnerships	9,574,000	---	9,574,000	12,000,000	+2,426,000	+12,000,000	+2,426,000
Subtotal, adult education	134,036,000	150,000,000	166,754,000	159,180,000	+25,144,000	+9,180,000	-7,574,000
Total, Vocational & adult education	1,015,131,000	1,031,095,000	1,091,966,000	1,076,130,000	+60,999,000	+45,035,000	-15,836,000
STUDENT FINANCIAL ASSISTANCE							
Pell Grants 2/	4,260,430,000	5,011,000,000	4,522,000,000	4,568,000,000	+307,570,000	-443,000,000	+46,000,000
Supplemental educational opportunity grants	408,415,000	416,583,000	460,000,000	416,583,000	+8,168,000	---	-43,417,000
Work-study	588,249,000	600,014,000	635,000,000	600,014,000	+11,765,000	---	-34,986,000
Perkins loans:							
Federal capital contributions	185,736,000	---	185,736,000	182,736,000	-3,000,000	+182,736,000	-3,000,000
Loan cancellations	24,892,000	22,000,000	22,000,000	22,000,000	-2,892,000	---	---
Income contingent loans	4,308,000	50,000,000	5,000,000	5,000,000	+692,000	-45,000,000	---
State student incentive grants	72,762,000	---	78,000,000	42,762,000	-30,000,000	+42,762,000	-35,238,000
Total, Student Financial Assistance	5,544,792,000	6,099,597,000	5,907,736,000	5,837,095,000	+292,303,000	-262,502,000	-70,641,000

1/ Includes workplace literacy partnerships new FY88.

2/ FY 1989 request includes $79,000,000 proposed for transmittal based on the net effect of two legislative proposals.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −): 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
GUARANTEED STUDENT LOANS							
Guaranteed student loans 3/	2,565,000,000	2,735,598,000	3,174,400,000	3,174,400,000	+609,400,000	+438,802,000	---
HIGHER EDUCATION							
Aid for institutional development	152,370,000	136,978,000	180,000,000	169,978,000	+17,608,000	+33,000,000	-10,022,000
Program development:							
Minority science improvement	5,266,000	5,371,000	5,371,000	5,371,000	+105,000	---	---
International education and foreign language studies:							
Domestic programs	25,419,000	25,419,000	25,419,000	25,419,000	---	---	---
Overseas programs	5,266,000	5,266,000	5,266,000	5,266,000	---	---	---
Fund for the Improvement of Postsec. Education	11,645,000	13,645,000	13,645,000	11,645,000	---	-2,000,000	-2,000,000
Innovative projects for community services	1,472,000	---	1,472,000	1,472,000	---	+1,472,000	---
Cooperative education	13,787,000	---	13,787,000	13,787,000	---	+13,787,000	---
Law school clinical experience	3,830,000	---	4,000,000	3,830,000	---	+3,830,000	-170,000
Subtotal, Program development	219,055,000	186,679,000	248,960,000	236,768,000	+17,713,000	+50,089,000	-12,192,000
Special programs for disadvantaged	205,841,000	205,841,000	228,000,000	215,841,000	+10,000,000	+10,000,000	-12,159,000

3/ Credit reform legislation proposed in budget would require an additional $3,094,482,000.

Support services:							
Veterans' education outreach......................	2,872,000	---	2,872,000	2,872,000	---	+2,872,000	---
Legal training for the disadvantaged..............	1,915,000	1,915,000	1,915,000	1,915,000	---	---	---
School, college & university partnerships.........	2,394,000	---	2,394,000	2,794,000	+400,000	+2,794,000	+400,000
Academic facilities:							
Interest subsidy grants...........................	21,878,000	22,744,000	22,744,000	22,744,000	+866,000	---	---
Academic facilities construction grants...........	6,366,000	---	---	---	-6,366,000	---	---
Subtotal, Academic facilities.....................	28,244,000	22,744,000	22,744,000	22,744,000	-5,500,000	---	---
Scholarships and fellowships:							
Patricia Roberts Harris Fellows:							
Graduate fellowships..........................	15,304,000	15,304,000	16,500,000	15,304,000	---	---	-1,196,000
Public service fellowships....................	3,221,000	---	3,500,000	3,221,000	---	+3,221,000	-279,000
Jacob K. Javits Fellowships.......................	6,702,000	6,702,000	8,300,000	6,702,000	---	---	-1,598,000
Graduate assistance in areas of national need.....	7,659,000	---	13,000,000	7,659,000	---	+7,659,000	-5,341,000
Minority participation in graduate education......	3,351,000	3,351,000	3,686,000	3,351,000	---	---	-335,000
Paul Douglas Teacher Scholarships.................	14,840,000	---	16,000,000	14,840,000	---	+14,840,000	-1,160,000
Robert C. Byrd honors scholarships................	7,659,000	7,659,000	8,300,000	8,300,000	+641,000	+641,000	---
Subtotal, Scholarships and fellowships..........	58,736,000	33,016,000	69,286,000	59,377,000	+641,000	+26,361,000	-9,909,000
Special grants:							
Assistance to Guam................................	479,000	---	479,000	479,000	---	+479,000	---
Robert A. Taft Institute of Government............	718,000	---	718,000	718,000	---	+718,000	---
Special higher education projects.................	14,217,000	---	---	---	-14,217,000	---	---
Subtotal, Special grants........................	15,414,000	---	1,197,000	1,197,000	-14,217,000	+1,197,000	---
Total, Higher education.........................	534,471,000	450,195,000	577,368,000	543,508,000	+9,037,000	+93,313,000	-33,860,000
COLLEGE CONSTRUCTION LOAN INSURANCE.................	19,148,000	---	---	---	-19,148,000	---	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or −): 1988 appropriation (6)	Budget estimate (7)	House allowance (8)
COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS							
LOAN LIMITATION:							
Borrowing authority	62,231,000	---	62,231,000	---	-62,231,000	---	-62,231,000
Interest subsidy payments	---	1,675,000	1,675,000	1,675,000	+1,675,000	---	---
EDUCATION RESEARCH AND STATISTICS							
Education research	46,573,000	51,531,000	50,343,000	44,960,000	-1,613,000	-6,571,000	-5,383,000
Statistics	20,953,000	32,869,000	33,169,000	29,500,000	+8,547,000	-3,369,000	-3,669,000
Total, Education research and statistics	67,526,000	84,400,000	83,512,000	74,460,000	+6,934,000	-9,940,000	-9,052,000
LIBRARIES							
Public libraries:							
Proposed legislation:							
Services to the disadvantaged	---	45,000,000	---	---	---	-45,000,000	---
Resource sharing	---	30,000,000	---	---	---	-30,000,000	---
Research and assessment	---	1,000,000	---	---	---	-1,000,000	---
Services	78,986,000	---	85,000,000	78,986,000	---	+78,986,000	-6,014,000
Construction	22,595,000	---	22,595,000	22,595,000	---	+22,595,000	---
Interlibrary cooperation	18,669,000	---	20,000,000	18,669,000	---	+18,669,000	-1,331,000
Training and demonstrations	718,000	---	718,000	718,000	---	+718,000	---
Research libraries	5,744,000	---	5,744,000	5,744,000	---	+5,744,000	---
Library literacy programs	4,787,000	---	4,787,000	4,787,000	---	+4,787,000	---

College library technology..............................	3,590,000	---	3,800,000	3,590,000	---	+3,590,000	-210,000
Total, Libraries..................................	135,089,000	76,000,000	142,644,000	135,089,000	---	+59,089,000	-7,555,000
PAYMENTS TO SPECIAL INSTITUTIONS							
AMERICAN PRINTING HOUSE FOR THE BLIND.................	5,266,000	5,381,000	5,381,000	5,400,000	+134,000	+19,000	+19,000
NATIONAL TECHNICAL INSTITUTE FOR THE DEAF.............	31,594,000	33,031,000	33,231,000	33,031,000	+1,437,000	---	-200,000
GALLAUDET UNIVERSITY..................................	62,195,000	63,463,000	66,800,000	65,000,000	+2,805,000	+1,537,000	-1,800,000
Subtotal, Handicapped Institutions..............	99,055,000	101,875,000	105,412,000	103,431,000	+4,376,000	+1,556,000	-1,981,000
HOWARD UNIVERSITY.....................................	172,203,000	175,647,000	180,647,000	176,147,000	+3,944,000	+500,000	-4,500,000
Reappropriation..................................	---	500,000	500,000	---	---	-500,000	-500,000
Total, Payments to Special Institutions..........	271,258,000	278,072,000	286,559,000	279,578,000	+8,320,000	+1,556,000	-6,981,000
DEPARTMENTAL MANAGEMENT							
PROGRAM ADMINISTRATION 1/............................	241,028,000	249,849,000	249,849,000	260,600,000	+19,572,000	+10,751,000	+10,751,000
OFFICE FOR CIVIL RIGHTS, SALARIES AND EXPENSES........	40,530,000	41,341,000	41,341,000	41,341,000	+811,000	---	---
OFFICE OF THE INSPECTOR GENERAL, SALARIES AND EXPENSES	17,560,000	17,911,000	17,911,000	18,400,000	+840,000	+489,000	+489,000
Total, Departmental management..................	299,118,000	309,101,000	309,101,000	320,341,000	+21,223,000	+11,240,000	+11,240,000
Total, Department of Education..................	20,240,691,000	21,084,423,000	21,948,605,000	21,759,095,000	+1,518,404,000	+674,672,000	-189,510,000

1/ FY 1989 request excludes $5,600,000 proposed for later transmittal associated with the National Student Loan Data System.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item (1)	1988 appropriation (2)	Budget estimate (3)	House allowance (4)	Committee recommendation (5)	Senate committee recommendation compared with (+ or -)		
					1988 appropriation (6)	Budget estimate (7)	House allowance (8)
TITLE IV - RELATED AGENCIES							
Action (Domestic Programs):							
Volunteers in Service to America:							
VISTA operations	19,828,000	21,910,000	21,910,000	21,910,000	+2,082,000	---	---
VISTA Literacy Corps	2,872,000	---	2,872,000	2,872,000	---	+2,872,000	---
Service learning	1,310,000	1,368,000	1,368,000	1,368,000	+58,000	---	---
Subtotal	24,010,000	23,278,000	26,150,000	26,150,000	+2,140,000	+2,872,000	---
Citizen Participation and Volunteer Demonstration Programs	2,682,000	3,401,000	2,682,000	3,401,000	+719,000	---	+719,000
Older Americans Volunteer Programs:							
Foster Grandparents Program	57,444,000	58,644,000	58,644,000	60,246,000	+2,802,000	+1,602,000	+1,602,000
Senior Companion Program	23,121,000	23,119,000	24,838,000	24,838,000	+1,717,000	+1,719,000	---
Retired Senior Volunteer Program	30,637,000	31,237,000	31,237,000	31,237,000	+600,000	---	---
Subtotal, Older Volunteers	111,202,000	113,000,000	114,719,000	116,321,000	+5,119,000	+3,321,000	+1,602,000
Program Support	25,191,000	26,312,000	25,312,000	26,025,000	+834,000	-287,000	+713,000
Total, Action	163,085,000	165,991,000	168,863,000	171,897,000	+8,812,000	+5,906,000	+3,034,000
Commission on Railroad Retirement Reform	---	---	1,000,000	---	---	---	-1,000,000

Corporation for Public Broadcasting: 1/							
FY 1990..	(232,648,000)	---	DEFER	---	(-232,648,000)	---	---
FY 1991 (current request) 2/......................	---	(214,000,000)	DEFER	(245,000,000)	(+245,000,000)	(+31,000,000)	(+245,000,000)
FY 1991 Satellite replacement.....................	---	---	DEFER	(57,500,000)	(+57,500,000)	(+57,500,000)	(+57,500,000)
Federal Mediation and Conciliation Service............	24,510,000	24,937,000	26,127,000	24,937,000	+427,000	---	-1,190,000
Federal Mine Safety and Health Review Commission......	3,906,000	4,079,000	4,079,000	4,079,000	+173,000	---	---
National Commission on Children.......................	---	---	---	800,000	+800,000	+800,000	+800,000
National Commission on Libraries and Information Science..	718,000	755,000	750,000	750,000	+32,000	-5,000	---
National Council on the Handicapped...................	892,000	974,000	974,000	1,174,000	+282,000	+200,000	+200,000
National Commission on Migrant Education..............	---	1,000,000	2,000,000	1,000,000	+1,000,000	---	-1,000,000
National Commission on Financing Postsecondary Education.......................................	---	---	800,000	---	---	---	-800,000
National Commission to prevent Infant Mortality.......	---	---	---	500,000	+500,000	+500,000	+500,000
National Labor Relations Board........................	133,097,000	138,647,000	138,647,000	138,647,000	+5,550,000	---	---
National Mediation Board..............................	7,004,000	6,551,000	6,551,000	6,551,000	-453,000	---	---
Occupational Safety and Health Review Commission......	5,885,000	6,002,000	6,002,000	5,831,000	-54,000	-171,000	-171,000
Physician Payment Review Commission (trust funds).....	(2,597,000)	(3,059,000)	(3,059,000)	(3,059,000)	(+62,000)	---	---
Prospective Payment Assessment Commission (trust funds)...	(3,592,000)	(3,664,000)	(3,664,000)	(3,664,000)	(+72,000)	---	---
Railroad Retirement Board:							
Dual benefits payments account 3/.................	352,323,000	336,185,000	355,000,000	355,000,000	+2,677,000	+18,815,000	---
Less income tax receipts on dual benefits.........	---	---	---	-28,000,000	-28,000,000	-28,000,000	-28,000,000
Federal payment to the Railroad Retirement Account	3,100,000	3,100,000	3,100,000	3,100,000	---	---	---
(Limitation on administration, retirement)........	(57,860,000)	(58,012,000)	(59,312,000)	(60,350,000)	(+2,490,000)	(+2,338,000)	(+1,038,000)
(Limitation on administration, unemployment) (non-add)..	(13,830,000)	(13,678,000)	(13,678,000)	(13,950,000)	(+120,000)	(+272,000)	(+272,000)
(Limitation on administration, review activity)...	(2,212,000)	(5,200,000)	(2,700,000)	(3,500,000)	(+1,288,000)	(-1,700,000)	(+800,000)

1/ FY 1988 approp. adv. in FY86 is $214 million.
FY 19[illegible] approp. adv. in FY87 is $228 million.
FY 1990 approp. adv. in FY88 is $232,648,000.

2/ FY 1991 proposed to be derived by reappropriating $32,600,000 from FY89-FY90.

3/ President's budget proposes $289,000,000 to be transferred from permanent account. FY 1988 amount does not include $9,700,000 contained in pending 1988 supplemental bill.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1988 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1989—Continued

[Amounts in dollars]

Item	1988 appropriation	Budget estimate	House allowance	Committee recom-mendation	Senate committee recommendation compared with (+ or -)		
					1988 appropriation	Budget estimate	House allowance
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Soldiers' and Airmen's Home (trust fund limitation):							
Operation and maintenance	35,879,000	36,613,000	37,657,000	37,700,000	+1,821,000	+1,057,000	+43,000
Capital outlay	15,445,000	13,215,000	15,000,000	15,000,000	-445,000	+1,785,000	---
United States Bipartisan Commission on Comprehensive Health care	---	---	---	1,046,000	+1,046,000	+1,046,000	+1,046,000
United States Institute of Peace	(4,308,000)	(3,376,000)	DEFER	(8,000,000)	(+3,692,000)	(+4,624,000)	(+8,000,000)
Total, title IV, Related Agencies:							
Federal Funds (all years)	745,844,000	738,079,000	766,550,000	740,012,000	-5,832,000	+1,933,000	-26,538,000
Appropriations, 1989	(745,844,000)	(738,079,000)	(766,550,000)	(738,966,000)	(-6,878,000)	(+887,000)	(-27,584,000)
(Unauthorized, not considered) by House	(236,956,000)	(217,376,000)	DEFER	(310,500,000)	(+73,544,000)	(+93,124,000)	(+310,500,000)
Trust funds	(66,661,000)	(69,935,000)	(68,735,000)	(70,573,000)	(+3,912,000)	(+638,000)	(+1,838,000)
Total, authorized and unauthorized	(982,800,000)	(955,455,000)	(766,550,000)	(1,050,512,000)	(+67,712,000)	(+95,057,000)	(+283,962,000)
SUMMARY							
Title I - Department of Labor:							
Federal Funds	6,262,432,000	6,143,812,000	6,562,032,000	6,515,261,000	+252,829,000	+371,449,000	-46,771,000
(Unauthorized/House deferred)	(9,574,000)	(846,000,000)	DEFER	---	(-9,574,000)	(-846,000,000)	---
Trust Funds	(2,689,239,000)	(2,668,274,000)	(2,775,275,000)	(2,802,369,000)	(+113,130,000)	(+134,095,000)	(+27,094,000)
Title II - Department of Health and Human Services:							
Federal Funds (all years)	98,929,970,000	106,763,880,000	106,517,505,000	108,156,452,000	+9,226,482,000	+1,392,572,000	+1,638,947,000
Current year	(85,179,970,000)	(91,972,880,000)	(91,726,505,000)	(93,309,452,000)	(+8,129,482,000)	(+1,336,572,000)	(+1,582,947,000)

1990 advance	13,750,000,000	14,791,000,000	14,791,000,000	14,847,000,000	+1,097,000,000	+56,000,000	+56,000,000
1991 advance	---	---	---	---	---	---	---
(Unauthorized, not considered) by House	(2,758,532,000)	(2,807,494,000)	DEFER	(2,947,421,000)	(+188,889,000)	(+139,927,000)	(+2,947,421,000)
Trust Funds	(4,949,447,000)	(5,603,267,000)	(5,530,919,000)	(5,719,369,000)	(+769,922,000)	(+116,102,000)	(+188,450,000)
Title III - Department of Education:							
Federal Funds	20,240,691,000	21,084,423,000	21,948,605,000	21,759,095,000	+1,518,404,000	+674,672,000	-189,510,000
Title IV - Related Agencies:							
Federal Funds (all years)	745,844,000	738,079,000	766,550,000	740,012,000	-5,832,000	+1,933,000	-26,538,000
Current year	(745,844,000)	(738,079,000)	(766,550,000)	(738,966,000)	(-6,878,000)	(+887,000)	(-27,584,000)
1990 advance	---	---	---	---	---	---	---
1991 advance	---	---	---	---	---	---	---
(Unauthorized, not considered) by House	(236,956,000)	(217,376,000)	DEFER	(310,500,000)	(+73,544,000)	(+93,124,000)	(+310,500,000)
Trust Funds	(66,661,000)	(69,935,000)	(68,735,000)	(70,573,000)	(+3,912,000)	(+638,000)	(+1,838,000)
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Total, all titles:							
Federal Funds (all years)	126,178,937,000	134,730,194,000	135,794,692,000	137,170,820,000	+10,991,883,000	+2,440,626,000	+1,376,128,000
Current year	(112,428,937,000)	(119,939,194,000)	(121,003,692,000)	(122,323,820,000)	(+9,894,883,000)	(+2,384,626,000)	(+1,320,128,000)
1990 advance	(13,750,000,000)	(14,791,000,000)	(14,791,000,000)	(14,847,000,000)	(+1,097,000,000)	(+56,000,000)	(+56,000,000)
1991 advance	---	---	---	---	---	---	---
Activities considered only by Senate	(3,005,062,000)	(3,870,870,000)	DEFER	(3,257,921,000)	(+252,859,000)	(-612,949,000)	(+3,257,921,000)
Grand total, authorized and unauthorized	(129,183,999,000)	(138,601,064,000)	(135,794,692,000)	(140,428,741,000)	(+11,244,742,000)	(+1,827,677,000)	(+4,634,049,000)
Trust Funds	(7,705,347,000)	(8,341,476,000)	(8,374,929,000)	(8,592,311,000)	(+886,964,000)	(+250,835,000)	(+217,382,000)